


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90168 021 ***150.00


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| DOCUMENT # P95000001782 | |  |
| 1. Entity Name EARTH ADVISORS, INC. | | |

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| Principal Place of Business 1100 NORTH 21ST AVE STE 109 HOLLYWOOD, FL 33020 | Mailing Address 1100 NORTH 21ST AVE STE 109 HOLLYWOOD, FL 33020 |
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| 2. Principal Place of Business 6916 Stirling Rd Suite, Apt. #, etc. | 3. Mailing Address 6916 Stirling Rd. Suite, Apt. #, etc. |
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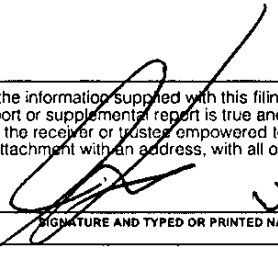
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| City & State Hollywood, FL | City & State Hollywood, FL | 4. FEI Number 65-0565749 | Applied For Not Applicable |
| Zip 33024 | Country USA | Zip 33024 | Country USA |

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| 6. Name and Address of Current Registered Agent HARRIS, JOHN 1100 N 21 AVE STE 109 HOLLYWOOD, FL 33020 6916 Stirling Rd Hollywood, FL 33024 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
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| 8. The above named entity admits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  John A. Harris President DATE: 8/31/06 (NOTE: Registered Agent signature required when reinstating) | |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTS HARRIS, JOHN 1100 N 21 AVE STE 109 6916 Stirling Rd HOLLYWOOD, FL 33020 33024 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP HARRIS, DARLENE B 1100 N 21 AVE STE 109 6916 Stirling Rd HOLLYWOOD, FL 33020 33024 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | |
| SIGNATURE:  John A. Harris SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date: 8/31/06 Daytime Phone #: 9549263339 |

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