FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

FILED May 15, 1999 8:00 am Secretary of State 05-15-1999 90009 043 ***150.00

1. Corporation	INIENI # PY6000	JUK 2 07U				
EARTH LIFE PRODUCTS CO.						
=	ARIA LIFE PROL	bucis co.		·		
Principal Plac	ce of Business	Mailing Address				
191	T IITH STREET SW	P.C. BOX 501	5			
í	260, FL 33778	LARGO, FL 3				
1			J		TE IN THIS SPACE	
USA	4	usA		3. Date Incorporated or Qualifed		
2 Principal C	Place of Business	2a. Mailing Address		3//3/1996 4. FEI Number		pplied For
21 730			(48908	59-3368097		ot Applicable
Suite, Apt.		Suite, Apt. #, etc.	70105		\$8.75	Additional
22		27		5Certifcate_of_Status_Desired	1 1	equired
City & Sta	te	City & State		6. Election Campaign Financing	<u>\$5.00</u>	May Be
23 51.	PETERSBURG, FL	28 ST. PETERS	BURG.FL	Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	8. This corporation owes the curr		_
24 33'		29 <u>33743 3</u>	o USA	Personal Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent	81 Name _	10. Name and Address of New F	legistered Agent	<u> </u>
	WARD, TERESA M		81 Name	TERESA M WARN		
		-1.)	82 Street A	ddress (P.O. Box Number is Not Accepta	ble)	
	1917 ITH STREETS	OVV	83	7301 107H AVE /	ν	
	LARGO, FL 33778					
	,		84 City	ST AFTERS ALLES	FL 85 3	3/7/0
11 Pursuant	to the provisions of Sections 607 050	2 and 607.1508. Florida Statutes	the above-named o	ST. PETERSBURG- orporation submits this statement for the	purpose of changing its	registered
office or	registered agent, or both, in the State	of Florida, Such change was auth	porized by the corpor	ration's board of directors. I hereby accept	t the appointment as re	egistered
011100 01 1	and fourthing and account the obtained	tions of Costion 607 0505 Florid	a Ctatutas			١ .
agent, I a	am familiar with, and accept the oblige	tions of, Section 607.0505, Florid	a Statutes.		4/20/29	
agent. I a	am familiar with, and accept the oblige	tions of, Section 607.0505, Florid	a Statutes.		4/30/19	
agent, I a	am familiar with, and accept the obligation of t	tions of, Section 607.0505, Florid	a Statutes.		4/30/99 DATE FICERS AND DIRECTO	ORS IN 12
agent. I a	am familiar with, and accept the obligation of the obligation of printed name of registered ager OFFICERS AN	tions of, Section 607.0505, Florid of and title if applicable. (NOTE: R	a Statutes. egistered Agent signature req	quired when reinstating)	4/30/99 DATE	
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agent, I a SIGNATURE 12. TITLE	Signature, typed or printed name of registered ager OFFICERS AN PVST WARD, TERESA M 1917 11TH STREET	tions of, Section 607.0505, Florid And title if applicable. (NOTE: R	a Statutes. egistered Agent signature req 13. 1.1 TITLE	aulired when reinstating) ADDITIONS/CHANGES TO OFI	4/30/99 DATE FICERS AND DIRECTO	ORS IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: