## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000027122

Entity Name: EARTH SCIENCE, INC

Address:

City-St-Zip:

10112 E RIVER SHORE DRIVE SE

ALTO, MI 49302

FILED Jan 15, 2006 Secretary of State

Entity Nar	Ne: EARTHS	CIENCE, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
8327 CORAL CREEK LOOP HUDSON, FL 34667 US				2405 FOX FOREST DRIVE LUTZ, FL 33549 US			
Current Mailing Address:			New Maili	New Mailing Address:			
10112 E R ALTO, MI	IVERSHORE D 49302 US	R SE					
FEI Number:	65-0660863	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )		
Name and	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:				
AUSLEY & 227 S. CAL	ROBERT N JR. MCMULLEN LHOUN ST. SSEE, FL 3230						
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing i	ts registe	ered office or registered agent, or bot	.h,	
SIGNATUR	RE:					_	
	Electroni	ic Signature of Registered Age	ent		Date		
Election Car	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	FARINA, ANĜEL	SHORE DRIVE SE	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	V () HARDER, GEOF 8327 CORAL CF HUDSON, FL 34	REEK LOOP	Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition R, GEORGE F IX FOREST DRIVE L 33549		
Title: Name:	S () FARINA, RICHA	Delete RD L JR	Title: Name:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANGELIKA M. FARINA D 01/15/2006