

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008000

Entity Name: ORION HERBS COMPANY

FILED  
May 13, 2005  
Secretary of State

## Current Principal Place of Business:

18260 N.E. 19TH AVE.  
#203  
NORTH MIAMI BEACH, FL 33162

## Current Mailing Address:

18260 N.E. 19TH AVE.  
#203  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

975 ARTHUR GODFREY ROAD  
#500  
MIAMI BEACH, FL 33140

## New Mailing Address:

975 ARTHUR GODFREY ROAD  
#500  
MIAMI BEACH, FL 33140

FEI Number: 65-0914881

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ATCHISON-NEVEL, DANIEL  
18260 NE 19 AVENUE #203  
NORTH MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

ATCHISON-NEVEL, DANIEL  
975 ARTHUR GODFREY ROAD SUITE 500  
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

05/13/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NEVEL, ORION  
Address: 18260 N.E. 19TH AVE., STE. 203  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: PD ( ) Delete  
Name: ATCHISON-NEVEL, DANIEL  
Address: 18260 N.E. 19TH AVE., STE. 203  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NEVEL, ORION  
Address: 975 ARTHUR GODFREY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP (X) Change ( ) Addition  
Name: ATCHISON-NEVEL, DANIEL  
Address: 975 ARTHUR GODFREY ROAD SUITE500  
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: ORION ATCHISON-NEVEL

P

05/13/2005

Electronic Signature of Signing Officer or Director

Date