2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000033803

FILED Jan 07, 2008 08:00 Al Secretary of State

1. Entity Name FLORIDA ESSENTIAL OILS, INC.			
Principal Place of Business M	ailing Address		
'=	246 OLD POLK CITY ROAD Akeland, Fl 33809	·, .	PA DE L
DO NOT WRITE IN THIS SPACE		01042008 No Chg-P CR2E034 (11/05)	
		ÇE.	4. FEI Number Applied For 59-3572078 Not Applicable
			5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			
JOHNSON, JOSEPH D 1246 OLD POLK CITY ROAD LAKELAND, FL 33809			DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of regestered agent and title if applicable. (NOTE: Regestered Agent signature required when reinstating) DATE			
FILE NOWIN FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			

TITLE NAME JOHNSON, JOSEPH D STREET ADDRESS 1246 OLD POLK CITY ROAD CITY-ST-7(P

U00000774238 01/07/08-80007-002 150.00

LAKELAND, FL 33809 TIFLE NAME STREET ADDRESS CITY-ST-23P TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

DO NOT WRITE IN THIS SPACE

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: _

JOSEPH JOSEPH HIGH AND TYPED ON PRINTED NAME OF BIGHING OFFICER OR DIRECTOR Young

Joseph D. Johnson

010408

863 859-4533

Daytme Phone #