

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036510

Entity Name: BOTANICAL VISIONS, INC.

FILED  
Mar 26, 2007  
Secretary of State

## Current Principal Place of Business:

340 SE 6TH TERR  
POMPAÑO BEACH, FL 33060 US

## New Principal Place of Business:

4651 N DIXIE HIGHWAY  
BOCA RATON, FL 33431 US

## Current Mailing Address:

441 NE 46TH ST.  
BOCA RATON, FL 33431

## New Mailing Address:

4651 N DIXIE HIGHWAY  
BOCA RATON, FL 33431

FEI Number: 65-0959043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOLFF, CLIFFORD A ESQ.  
1401 E BROWARD BLVD STE 305  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: REEVE, WILLIAM H  
Address: 15831 NORTH ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: REEVE, WILLIAM H  
Address: 441 NE 46TH ST  
City-St-Zip: BOCA RATON, FL 33431

Title: VP ( ) Change (X) Addition  
Name: RIDDLE, ALBERT  
Address: 4420 SPRING BLOSSOM DR.  
City-St-Zip: KISSIMMEE, FL 34746

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.

SIGNATURE: WILLIAM H REEVE, IV

P

03/26/2007

Electronic Signature of Signing Officer or Director

Date