this notice and must be completed.

FORM D

UNITED STATES SECURITIES AND EXCRANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

| | | |
|--|------|------|

PAGE 02

1333117



| | SECTION 4(6), AND/OR | DATE RECEIVED |
|---|--|---|
| UNIFO | RM LIMITED OFFERING EXEMPTION | |
| | nent and name has changed, and indicate change.) | |
| | | RECEIVED (4) |
| Filing Under (Check box(es) that apply): Rt Type of Filing: New Filing Amendmen | the 504 Rule 505 Rule 506 Section 4(6) ULO | 1 - 5 - 51 HF |
| | A. BASIC IDENTIFICATION DATA | 20F = # 2007 |
| 1. Enter the information requested about the issu | er | |
| Name of Issuer (| t and name has changed, and indicate change.) | 185/89/ |
| BOTANIEX . INC | ph | |
| Address of Executive Offices 935 ANDLEY ROA | D SOUTH AJAX OUTAUD (90 | A S S S S S S S S S S S S S S S S S S S |
| Address of Principal Business Operations | | hous Number (Including Area Code) |
| (If different from Executive Offices) | L17 1 M8 CANDA | 9600 |
| Brief Description of Business | | / |
| MANN FACTURER \$ | SALES OF NATURAL INGRE | DIENTS / PEDDUCTS |
| Actual or Estimated Date of Incorporation or Organ | ed partnership, already formed other (please speced pertnership, to be formed Month Year Actual Estimated ter two-letter U.S. Postal Service above visition for State: | JUL 15 2005 |
| | N for Canada; PN for other foreign jurisdiction) | |
| GENERAL INSTRUCTIONS | | |
| Federal: Who Must File: All issuers making an offering of so 77d(6). | curities in reliance on an exemption under Regulation D or Section | 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. |
| | 1 15 days after the first sale of securities in the offering. A notice the date it is received by the SBC at the address given below of, if d States registered or certified mail to that address. | |
| Where To File; U.S. Securities and Exchange Com- | unission, 450 Fifth Street, N.W., Washington, D.C. 20549. | |
| Copies Required: Five (5) copies of this notice mu photocopies of the manually signed copy or bear ty | est be filed with the SEC, one of which must be manually signed. ped or printed signatures. | Any copies not manually signed must be |
| | all information requested. Amendments need only report the name susterial changes from the information previously supplied in Part | |
| Filing Fee: There is no federal filing fee. | | |
| ULOE and that have adopted this form. Issuers r | te Uniform Limited Offering Exemption (ULOE) for sales of sec clying on ULOE must file a separate notice with the Securities the payment of a fee as a procundition to the claim for the exem | Administrator in each state where sales |

- ATTENTION -

accessopany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a less of an available state exemption unless such exemption is predictated on the filing of a federal notice.

| | A. BASIC IDI | INTIFICATION DATA | |
|--|--|--|--|
| 2. Enter the information requested for the | e following: | | |
| · Sech promoter of the issuer, if th | ic issuer has been organized w | rithin the past five years; | |
| Each beneficial owner having the | power to vote or dispose, or di | rect the vate or disposition of, 10% or more | of a class of equity securities of the issuer. |
| | | corposate general and managing partners | |
| Bach general and managing parts | ner of partnership issuers. | | |
| Check Box(es) that Apply: Promot | | Executive Officer Director | General and/or Managing Partner |
| Carlo (Giral Heat) | | | |
| Full Name (Last name first, if individual) LIAO MEI S | HENG | | |
| 5 - 5 - A | | ade) | - 0 |
| 935 AVOLEY ROAD | South, Ajan | CONTAGO LIZ | Z 148 CAWALA |
| Check Box(es) that Apply? Promos | ter Beneficial Owner | Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | |
| Business or Residence Address (Number | and Street, City, State, Zip C | (ode) | |
| Check Box(es) that Apply: Promo | ter Beneficial Owner | Executive Officer Director | General and/or Managing Partner |
| Fall Name (Last name first, if individual) | and the second s | | A. A |
| Business or Residence Address (Number | r and Street, City, State, Zip C | Code) | |
| Check Box(es) that Apply: Promo | Rer Beneficial Owner | Executive Officer Director | General and/or Managing Partner |
| Full Name (Last name first, if individual) | , a nga nga nga nga nga nga nga nga nga n | | |
| Business or Residence Address (Number | r and Street, City, State, Zip C | Code) | |
| Check Box(es) that Apply: Promo | ter Beneficial Owner | Executive Officet Directo | General and/or Managing Partner |
| Full Name (Last name first, if individual) | | , | |
| Business or Residence Address (Number | r and Street, City, State, Zip C | Code) | |
| Check Box(es) that Apply: Promo | Net Beneficial Owner | Executive Officer Director | General and/or Managing Partner |
| Fell Name (Last name first, if individual) | | | |
| Business or Residence Address (Number | s and Street, City, State, Zip (| Code) | |
| Check Box(es) that Apply: Promo | Beneficial Owner | Bxecutive Officer Directo | or General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | |
| Business or Residence Address (Number | r and Street, City, State, Zip (| Code) | and the property of the second of the secon |
| (Ut | se blank sheet, or copy and as | e additional copies of this sheet, as necess | |

| | | | | | B. IN | FORMATIC | ON ABOUT | OFFERIN | G | | | | |
|-----|--|--|--|---|---|---|---|---|---|--|------------------------------|---------------------------------------|-----------|
| | | | 4 | | iand en acti | ******* | anadisad i- | vectore in | this offerin | 10? | | Yes | No No |
| 1. | Has the i | ssuer sold. | , or does the | | | i, to non-ac Appendix, | | | | | 138688844444444 | L | ~ |
| 2. | What ic | the minim | um investm | | | | | | | | *********** | s 10 | <u>00</u> |
| ▲• | | | | | | | | | | | | Yes | No |
| 3. | | | ocrmit joint | | | | | | | | | X | |
| 4. | commiss If a perso or states a broker | nion or simi on to be list list the na or dealer, | ion requesti ler remuner ted is an ass me of the bi you may so | ation for so ociated per oker or de at forth the | olicitation rson or age aler. If mo | of purchase nt of a brok re than five | rs in conne er or dealer (5) person | ction with s registered s to be liste | sales of sec with the SI al are assoc | orities in th EC and/or v | ic offering. with a state | · · · · · · · · · · · · · · · · · · · | |
| Pul | i Name (i | asi name i | first, if indi | vidual) | | | | | | | | | |
| Bu | siness or l | Residence | Address (N | umber and | Street, Ci | ty, State. 2 | ip Code) | | | | | | |
| Na | me of Ass | ociated Br | oker or Dea | iler | | | | | | | | | |
| Sta | ies in Wh | ich Person | Listed Has | Solicited | or Intends | to Solicit I | urchasers | | | | | · · · · · · · · · · · · · · · · · · · | |
| | (Check | "All States | or check | individual | States) | | | , · · · · · · · · · · · · · · · · · · · | turuq | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ∑ ∧II | States |
| | AL | AK | AZ | [AR] | CA | CO | CT | DE | (DC) | FL | GA | HI | ID] |
| | | IN IN | TA | KS | KY | LA | ME | MD | MA ND | IM OH | MN OK | MS OR | MO PA |
| | MT RI | NE. | NV SD | HM TN | TX. | UT | NY VI | NC VA | WA | WV | WI) | WY | PR |
| Far | A Name (| ASI RAIDA | first, if ind | ividual\ | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | | | | | | | | |
| Be | siness or | Residence | : Address (1 | Vumber an | d Street, C | ity. State. | Zip Code) | | | | | | |
| No | me of As | sociated Br | roker or De | alcr | | | | | | | | | |
| Sus | | | Listed Ha | | | | | | | | | | |
| | (Check | "All State: | s" or check | individua | States) | BREES *********************************** | | | | | rp | ☐ AJ | l States |
| | AL | AK | AZ | AR | CA | CO | | DE | DC | | GA | H | (ID) |
| | MT | IN NE | IA NV | KS NH | KY NJ | LA NM | ME | MD NC | MA ND | MI OH | MN OK | MS OR | MO PA |
| | RI | SC | 30 | 1N | ĪX | UT | VT | VA | WA | WV | WI | WY | PR |
| Fu | Il Name (| Last name | first, if ind | ividual) | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Bu | siness or | Residence | Address (1 | Number an | d Street, C | lity, State, | Zip Code) | | | | | | |
| Ne | me of As | sociated B | roker or De | alcr | , | | | | | | | | |
| Str | ntes in Wi | nich Person | Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | (Check | "All State | s" or check | indívidua | States) | | 107 57 174 144 phi #1 | ****** | -dqt | ************** | | ☐ AI | l States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC | FL | GA | HI | ID |
| | | IN | IA] | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT RI | NE SC | NV SD | NA IN | | NM UT | NY VT | NC VA | WA | OH WV | OK WI | OR WY | PA PR |
| | | ····· | | | | | | | | | | | |

| | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and | | • |
|-----|---|---------------------|--------------------------------------|
| | already exchanged. | Aggregate | Amount Already Sold |
| | Tyle in occurry | Offering Price | 50ia |
| | Debt | LADA DAA | . 0 |
| | Equity\$ | 1,000,000 | \$ |
| | Common Preferred | al la | . D |
| | Convertible Securities (including warrants) | | 5 |
| | Paraceship Interests | AND | s |
| | Other (Specify) | MA | \$ |
| | Total | 1,000,000 | ş <u>O</u> |
| | Answer also in Appendix, Column 3, if filing under ULOE. | * * | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited investors | Number Investors | Aggregate Dollar Amount of Purchases |
| | | | 5 |
| | Non-accredited Investors | | \$ |
| | Total (for filings under Rule 504 only) | | \$ |
| 3. | If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities | | |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | Type of | Dollar Amount |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the | Type of Security | Dollar Amount Sold |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | Security | |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering | Security | |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 | Security | |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 | Security | Sold \$ |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A | Security | |
| 4 | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 | Security Co MMOV | Sold \$ |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 | Security 20 HMOU | Sold \$ |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | Security Common | Sold \$ |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs | Security 20 HMOU | Sold \$ |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs | Security Common | Sold \$ |
| | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Engineering Fees Engineering Fees | Security Common | Sold \$ |
| . 4 | sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs | Security 20 HMOV | Sold \$ |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5

MELSHEUG LIAO

| | C. OFFERING PRICE, NUMBER | r of investors, expenses and use of i | ROCEEDS | |
|-----|---|--|-------------------------|--|
| | b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer." | estion 4.a. This difference is the "adjusted gross | | 979500 |
| 5. | Indicate below the amount of the adjusted gross procee each of the purposes shown. If the amount for any p check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C | surpose is not known, furnish an estimate and c payments listed must equal the adjusted gross | | , |
| | | | Payments to Officers, | |
| | | | Directors, & Affiliates | Payments to Others |
| | Salaries and fees | | 055000C | 0 5 100,000 |
| | Purchase of real estate | *************************************** | | 100,000 |
| | Purchase, rental or leasing and installation of machin | | — □\$ | л\$ |
| | Construction or leasing of plant buildings and facilit | | | |
| | Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger) | or securities of another | □\$ | |
| | Repayment of indebtedness | 277990 35 MODERN 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | s | s |
| | Working capital | \$ | | 0372950L |
| | Other (specify): | | | |
| | | *************************************** | | |
| | Column Totals | | 0:50 000 | 059295c |
| | Total Payments Listed (column totals added) | | _s_ | 179,500 |
| | | D. FEDERAL SIGNATURE | | |
| sig | c issuer has duly caused this notice to be signed by the un nature constitutes an undertaking by the issuer to furnis information furnished by the issuer to any non-accred | th to the U.S. Securities and Exchange Commi | ssion, upon writte | le 505, the following n request of its staff, |
| iss | | ignature | Date | 1 7005 |
| Ne | TAUIEX, NO. me of Signer (Print or Type) | itle of Signer (Print or Type) | Jour | 4,2005 |

- ATTENTION -

PRESIDENT

Intentional missistements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| and some | | e. State signature |
|----------|----|---|
| | 1. | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes Provisions of such rule? |
| | | See Appendix, Column 5, for state response. |
| | 2. | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law. |
| | 3. | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to officees. |
| | 4. | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. |

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Issaer (Print or Type)

Signature

Date

Date

July 4, 2005

Name (Print or Type)

Title (Print or Type)

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.