

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90038 004 ***158.75

DOCUMENT # P95000077791

1. Entity Name

DIETA FOODS, INC.

Principal Place of Business

Mailing Address

**5601 NW 159TH ST
 MIAMI FL 33014**

**C/O IVAN A. GOMEZ, P.A.
 601 BRICKELL KEY DR SUITE 507
 MIAMI FL 33131-2652**

2. Principal Place of Business

3. Mailing Address

5601 N.W. 159th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Miami, FL 33014

Zip

Country

Zip

Country

4. FEI Number

65-0618704

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VASCONCELOS, R. FERNANDEZ
 5601 NW 159 STREET
 MIAMI FL 33014**

Name

Ricardo Fernandez Vasconcelos

Street Address (P.O. Box Number is Not Acceptable)

5601 N.W. 159th Street

City

Miami,

FL

Zip Code

33014

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.

SIGNATURE

R. Vasconcelos

27 MARCH 2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **DPST**
 STREET ADDRESS **FERNANDEZ-VASCONCELO, RICARDO**
 CITY-ST-ZIP **5601 NW 159TH ST
 MIAMI FL 33014**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

R. Vasconcelos
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 MARCH 2000

Date

Daytime Phone #

CR2E034 (9/99)