

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011856

Entity Name: NUTRIR BARRANQUILLA, INC.**Current Principal Place of Business:**19195 MYSTIC POINTE DRIVE
PH 9
AVENTURA, FL 33180**Current Mailing Address:**19195 MYSTIC POINTE DRIVE
PH 9
AVENTURA, FL 33180**FEI Number:** 26-1552096**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DUNKLEY, LINDSAY
14100 PALMETTO FRONTAGE RD
SUITE 201
MIAMI LAKES, FL 33016 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	SCHRAER, MONICA
Address	3530 MYSTIC POINTE DRIVE UNIT 2007
City-State-Zip:	AVENTURA FL 33180

Title	S
Name	ABUDINEN, KAREN
Address	14100 PALMETTO FRONTAGE RD
City-State-Zip:	MIAMI LAKES FL 33016

Title	M
Name	MINSKI, JOEL
Address	14100 PALMETTO FRONTAGE RD NO 201
City-State-Zip:	MIAMI LAKES FL 33016

Title	VP
Name	ZYLBERBLUM, FRANCIS
Address	19195 MYSTIC POINTE DRIVE PH 9
City-State-Zip:	AVENTURA FL 33180

Title	T
Name	LERNER, SAMUEL R
Address	14100 PALMETTO FRONTAGE RD NO 201
City-State-Zip:	MIAMI LAKES FL 33016

Title	M
Name	MINSKI, JOSE
Address	14100 PALMETTO FRONTAGE RD NO 201
City-State-Zip:	MIAMI LAKES FL 33016

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANCIS ZYLBERBLUM

VP

04/14/2013

Electronic Signature of Signing Officer/Director Detail_____
Date