

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000058611

**Entity Name:** NUTRIHEALTH TECH, INC.

**Current Principal Place of Business:**

3600 RED ROAD  
STE. #403  
MIRAMAR, FL 33025

**Current Mailing Address:**

PO BOX 16632  
PLANTATION, FL 33318 US

**FEI Number: 82-2120786**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SANDRA ROLON & ASSOCIATES, CPA, PA  
3600 RED ROAD STE 403  
MIRAMAR, FL 33025 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 D/P

Name ACOCELLA, ANGELO

Address PO BOX 16632

City-State-Zip: PLANTATION FL 33318

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

**SIGNATURE: ANGELO ACOCELLA**

**PRESIDENT**

**03/20/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date