

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000060

**Entity Name:** JAX SPORTS NUTRITION, INC.

**Current Principal Place of Business:**

297 KINGSBURY GRADE  
SUITE 100  
STATELINE, NV 89449

**Current Mailing Address:**

PO BOX 4470  
STATELINE, NV 89449-4470

**FEI Number: APPLIED FOR**

**Certificate of Status Desired:** No

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

NORTHWEST REGISTERED AGENT LLC.  
7901 4TH STREET N,  
SUITE 300  
ST.PETERSBURG, FL 33702 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, S, T, D  
Name BATRICK, D.  
Address APARTADO 0816-00386  
City-State-Zip: PANAMÁ REPÚBLICA DE PANAMÁ

*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: D. BATRICK**

**SECRETARY**

**04/08/2019**

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

\_\_\_\_\_  
Date