

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005543

FILED
Apr 30, 2007
Secretary of State

Entity Name: TIME OF YOUR LIFE NUTRACEUTICALS INC.

Current Principal Place of Business:

146 SECOND STREET N.
SUITE 310
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

146 SECOND STREET N.
SUITE 310
ST PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 22-3499679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORTNER, RICHARD L
1201 SE 2ND AVENUE
APT 405
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

CORPORATE BUSINESS SUITES
146 SECOND STREET N.
SUITE 310
SAINT PETERSBURG, FL 33701 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: LEE ELLIOTT

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: FORTNER, RICHARD L
Address: 1201 SE 2ND COURT, APT 405
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: SIMMONS, PAUL
Address: 8619 LAUREL DRIVE
City-St-Zip: PINELLAS PARK, FL 33782

Title: D () Delete
Name: STITES, ROBERT C
Address: 718 BRADFORD AVE
City-St-Zip: WESTFIELD, NJ 07090

Title: D () Delete
Name: CATANEO, ANDREA
Address: 81 MEADOWBROOK ROAD
City-St-Zip: RANDOLPH, NJ 07869

Title: D () Delete
Name: EVANS, WILLIAM G
Address: 14 MEADOW GLEN ROAD
City-St-Zip: LANSDALE, PA 19446

Title: D () Delete
Name: GERSON, SCOTT
Address: MILLTOWN ROAD
City-St-Zip: BREWSTER, NJ 10509

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD L FORTNER

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date