2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40042

FILED Jan 21, 2005 Secretary of State

Entity Name: INSTITUTO DE VIDA Y SALUD NATURAL INC

yu.		O DE VIDA I OAROB IVATORA	AL, 1140.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3275 SW 3 MIAMI, FL					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
3275 SW 3 MIAMI, FL					
FEI Number:	59-2491972	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	3 ST 33135 US named entity set of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATOR		ic Signature of Registered Age	nt	 Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () GOMEZ, RENE 3275 SW 3 ST MIAMI, FL	Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () GOMEZ, NANC 3275 SW 3 ST MIAMI, FL	Delete Y,	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RENE GOMEZ P 01/21/2005