

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L29363

FILED
Apr 30, 2004
Secretary of State

Entity Name: TREASURE COAST NUTRITION, INC.

Current Principal Place of Business:

9092 S FEDERAL HWY
PORT ST LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

9092 S FEDERAL HWY
PT ST LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 65-0154195 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRIOS, FERNANDO J.
2442 DRAYTON RD
PT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: BARRIOS, FERNANDO J.,
Address: 2442 DRAYTON ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: V () Delete
Name: BARRIOS, FERNANDO G
Address: 2442 DRAYTON ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: S () Delete
Name: STRUDAS, DIANA
Address: 2442 DRAYTON ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34952

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:

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: FERNANADO J BARRIOS

OFFI

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date