## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000025019

FILED Apr 30, 2004 Secretary of State

Entity Nam	ne: VIT-IMMUN	NE, INC.					
Current Principal Place of Business:			New Principal Place of Business:				
	YWOOD BLVD OD, FL 33021						
Current Mailing Address:			New Mailing Address:				
	YWOOD BLVD OD, FL 33021						
FEI Number:	65-0999680	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired (	)	
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
SUITE 1700 FT. LAUDE	OLAS BLVD. ) RDALE, FL 33 named entity su	301 US Ibmits this statement for the p	urpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUR							
Electronic Signature of Registered Agent			nt		Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () E KIRCHENBAUM, 5821 HOLLYWOOD, F	OD BLVD.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	KELLER, RO 5821 HOLLY			

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.