

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000103416

Entity Name: NATURE'S LABS USA, INC.

FILED
Sep 18, 2007
Secretary of State

Current Principal Place of Business:

11345 S.W. 62ND AVENUE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

11345 S.W. 62ND AVENUE
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-1053979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTALVAN, LUISA
11345 S.W. 62ND AVENUE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

MONTALVAN, BERNA P
11345 S.W. 62ND AVENUE
MIAMI, FL 33156 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: BERNA MONTALVAN

09/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZAMBRANO, PETRA
Address: 11345 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: MONTALVAN, LUISA E
Address: 11345 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

Title: ST () Delete
Name: MONTALVAN, BERNA
Address: 11345 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ZAMBRANO, PETRA
Address: 11345 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

Title: VP (X) Change () Addition
Name: ARGUELLO, ISOLDA
Address: 10317 NW 9TH STREET/CIRCLE, # 504
City-St-Zip: MIAMI, FL 33172

Title: PT (X) Change () Addition
Name: MONTALVAN, BERNA
Address: 11345 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

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: BERNA MONTALVAN

P

09/18/2007

Electronic Signature of Signing Officer or Director

Date