

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001606

FILED
Mar 15, 2011
Secretary of State

Entity Name: NUTRITION FOR HEALTH OF TAMPA, INC.

Current Principal Place of Business:

1910 E. PALM AVE.
SUITE 10104
TAMPA, FL 336053984

New Principal Place of Business:

1910 E. PALM AVE.
SUITE 10104
TAMPA, FL 33605

Current Mailing Address:

1910 E. PALM AVE.
SUITE 10104
TAMPA, FL 336053984

New Mailing Address:

19201-B NC HWY 88 W
CRESTON, NC 28615

FEI Number: 59-3689890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REZAPOUR, KAMRAN
1910 E. PALM AVE.
SUITE 10104
TAMPA, FL 33605 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

OFFICERS AND DIRECTORS:

Title: PSTD
Name: REZAPOUR, KAMRAN
Address: 1910 E. PALM AVE. #10104
City-St-Zip: TAMPA, FL 336053984

I hereby 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 all other like empowered.

SIGNATURE: KAMRAN REZAPOUR

PSTD

03/15/2011

Electronic Signature of Signing Officer or Director

Date