

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039818

Entity Name: NUTRIAL COMPANY, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

1440 JOHN F. KENNEDY CAUSEWAY #406
NORTH BAY VILLAGE, FL 33141

New Principal Place of Business:

Current Mailing Address:

1440 JOHN F. KENNEDY CAUSEWAY #406
NORTH BAY VILLAGE, FL 33141

New Mailing Address:

FEI Number: 65-1103219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILGUEIRAS, JULIO C JR.
1440 JOHN F. KENNEDY CAUSEWAY #406
NORTH BAY VILLAGE, FL 33141 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: MD () Delete
Name: AZEVEDO, EDUARDO GOMES
Address: 7525 E. TREASURE DR. APT. 7J
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: VP () Delete
Name: ACOSTA, JULIO M
Address: 3468 SOHO ST #102
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: AZEVEDO, EDUARDO GOMES
Address: 1440 JOHN F. KENNEDY CAUSEWAY #406
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: VP (X) Change () Addition
Name: AZEVEDO, NATASHA R
Address: RUA URIMONDUBA, 111, APT. 81
City-St-Zip: SAN PAULO, BRAZIL, BR 04530 08

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: EDUARDO GOMES AZEVEDO

MD

04/27/2009

Electronic Signature of Signing Officer or Director

Date