

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075350

FILED
Jul 02, 2004
Secretary of State

Entity Name: ADVANCED NUTRITIONAL BIOSYSTEMS, INC.

Current Principal Place of Business:

8034 SUNPORT DRIVE
SUITE 401
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

PO BOX 532079
ORLANDO, FL 328532079

New Mailing Address:

FEI Number: 59-3743377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, H. LOUIS CPA
1640 LEO RD
WINTER PARK, FL 32792

Name and Address of New Registered Agent:

ALAVI, SIAMACK P
8034 SUNPORT DR SUITE 401
ORLANDO, FL 32809

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: SIAMACK ALAVI 07/02/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: ALAVI, SIA-MACK
Address: PO BOX 533736
City-St-Zip: ORLANDO, FL 32853

Title: DVS (X) Delete
Name: GARCIA, FRANCISCO A
Address: 8024 ST ANDREWS CIRCLE
City-St-Zip: ORLANDO, FL 32835

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALAVI, SIA-MACK
Address: PO BOX 533736
City-St-Zip: ORLANDO, FL 32853

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: DIAZ, GILBERTO
Address: P.O. BOX 533736
City-St-Zip: ORLANDO, FL 32809

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: SIAMACK ALAVI P 07/02/2004

Electronic Signature of Signing Officer or Director Date