## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000090686

Entity Name: NATURAL VALUES, INC.

May 01, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9113 SOUTHWEST 108TH CIRCLE COURT MIAMI, FL 33176 **Current Mailing Address: New Mailing Address:** 9113 SOUTHWEST 108TH CIRCLE COURT MIAMI, FL 33176 FEI Number: 65-1139344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: (X) Change ( ) Addition Name: JACOB, SAMANTHESSA R Name: JACOB, SAMANTHESSA R 9113 SOUTHWEST 108TH CIRCLE COURT 9113 SOUTHWEST 108TH CIRCLE COURT Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33176 ( ) Delete Title: VΡ Title: ( ) Change (X) Addition Name: Name: WILCHER, JASON 11550 NW 11TH AVENUE Address: Address: MIAMI, FL 33168 City-St-Zip: City-St-Zip: Title: ( ) Change (X) Addition Title: () Delete JACOB, PARMALYN Name: Name: 6990 SW 57TH STREET Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33143 Title: () Delete Title: ( ) Change (X) Addition CHARLES, WEBBER Name: Name: Address: Address: 1845 NW 132 STREET City-St-Zip: City-St-Zip: MIAMI, FL 83167 Title: Title: ( ) Change (X) Addition ( ) Delete MISICK, LISA K Name: Name: Address: 520 SW 113 TERRACE Address: City-St-Zip: City-St-Zip: PLANTATION, FL 33325 Title: () Delete Title: ( ) Change (X) Addition SKINNER, AMANDA Name: Name: 14818 SW 124 PLACE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33186

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: SAMANTHESSA R. JACOB PSD 05/01/2002