

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90040 010 ***158.75

DOCUMENT # P02000024435 1. Entity Name NUTRIBASICS, INC.			
Principal Place of Business 904 JANMAR CT., STE. A CLERMONT, FL 34711		Mailing Address 904 JANMAR CT., STE. A CLERMONT, FL 34711	
2. Principal Place of Business 1380 Grand Highway Suite, Apt. #, etc. Suite 200		3. Mailing Address P. O. Box 1044 Suite, Apt. #, etc.	
City & State Clermont, Florida Zip 34711		City & State Minneola, Florida Zip 34755	
Country Lake		Country Lake	
4. FEI Number 01-0635355		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RUIZ, NINETT 904 JANMAR CT., STE. A CLERMONT, FL 34711		7. Name and Address of New Registered Agent Name Ninett I. Ruiz Street Address (P.O. Box Number is Not Acceptable) 1380 Grand Highway Suite 200 City Clermont	
State FL		Zip Code 34711	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE NINETT I. Ruiz Office Manager 2/18/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME MCLEAN, W. B. JR STREET ADDRESS 904 JANMAR CT., STE. A CITY-ST-ZIP CLERMONT, FL 34711	<input type="checkbox"/> Delete	TITLE Change NAME 20574 Sugar Loaf Mountain Road STREET ADDRESS Clermont, Florida 34711 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME MCLEAN, BEN III STREET ADDRESS 904 JANMAR CT., STE. A CITY-ST-ZIP CLERMONT, FL 34711	<input type="checkbox"/> Delete	TITLE Change NAME 17514 Cobblestone Stone Lane STREET ADDRESS Clermont, Florida 34711 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME MCLEAN, MATT STREET ADDRESS 904 JANMAR CT., STE. A CITY-ST-ZIP CLERMONT, FL 34711	<input type="checkbox"/> Delete	TITLE Change NAME 10311 Smokerise Lake STREET ADDRESS Clermont, FL 34711 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME BOWMAN, RANDALL STREET ADDRESS 904 JANMAR CT., STE. A CITY-ST-ZIP CLERMONT, FL 34711	<input type="checkbox"/> Delete	TITLE Change NAME 3613 Cochran Road STREET ADDRESS Gainesville, GA 30506 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE Change NAME Change STREET ADDRESS Change CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE Change NAME Change STREET ADDRESS Change CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE Change NAME Change STREET ADDRESS Change CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE Change NAME Change STREET ADDRESS Change CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with a address, with all other like empowered.			
SIGNATURE: PRESIDENT 2/17/04 (352) 242-9347 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			