


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 27, 2006 8:00 am
Secretary of State

06-06-2006 90015 002 ***550.00

DOCUMENT # P02000036841 1. Entity Name NUTREX RESEARCH, INC.	
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Principal Place of Business 6869 STAPOINT CT STE 106 WINTER PARK, FL 32792	Mailing Address 6869 STAPOINT CT STE 106 WINTER PARK, FL 32792
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66020837



06012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0657553	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCCARRELL, JEFFREY A 6869 STAPOINT CT STE 106 WINTER PARK, FL 32792

**DO NOT WRITE
IN THIS SPACE**

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 *Jeffrey A. McCarrrell, VP* DATE 6/1/06
(Signature, typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature is required when re-issuing).)

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MCCARRELL, JEFFREY A 6869 STAPOINT CT STE 106, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD INGENHOHL, JENS O 12205 LAKE CYPRESS CIR E209 ORLANDO, FL 32828
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.

SIGNATURE: *Jeffrey A. McCarrrell* DATE 6/22/06 DAYTIME PHONE # 407-652-7008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR