

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90146 040 ***150.00

DOCUMENT # P02000083985

1. Entity Name

GLOBAL NUTRACEUTICALS, INC.



Principal Place of Business

**1904 CALUMET ST
CLEARWATER FL 33765**

Mailing Address

**1904 CALUMET ST
CLEARWATER FL 33765**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

41-2054167

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**A1A CORPORATE SERVICES, INC.
1221 BRICKELL AVE SUITE 900
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **RONALD VASSALLO**

Street Address (P.O. Box Number is Not Acceptable)

1904 CALUMET ST

City **CLEARWATER**

FL

Zip Code
33765

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

Ronald Vassallo

1-7-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **VASSALLO, RONALD**
STREET ADDRESS **1904 CALUMET ST**
CITY-ST-ZIP **CLEARWATER FL 33765**

TITLE **CEO** ☐ Delete
NAME **R**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEO D** ☐ Change ☒ Addition
NAME **BRIAN VASSALLO**
STREET ADDRESS **1904 CALUMET ST**
CITY-ST-ZIP **CLEARWATER, FL 33765**

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CEO D** ☒ Change ☒ Addition
NAME **RONALD VASSALLO**
STREET ADDRESS **1904 CALUMET ST**
CITY-ST-ZIP **CLEARWATER, FL 33765**

TITLE **PRES.** ☐ Change ☒ Addition
NAME **EDWARD ROBINSON**
STREET ADDRESS **1904 CALUMET ST**
CITY-ST-ZIP **CLEARWATER, FL 33765**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 an address, with all other like empowered.

SIGNATURE:

Ronald Vassallo **RECORDED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-03

Date

727-442-2721

Daytime Phone #

CR2E034 (10/02)