

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061302

Entity Name: VITA SALUTE NUTRITION, INC.

FILED  
May 14, 2009  
Secretary of State

**Current Principal Place of Business:**

7900 NW 68 ST  
MIAMI, FL 33166 US

**New Principal Place of Business:**

9600 NW 38TH ST  
STE. 206  
MIAMI, FL 33178 US

**Current Mailing Address:**

603 FINE DR.  
STE. 417  
SALT LAKE CITY, UT 84119 US

**New Mailing Address:**

9600 NW 38TH ST  
STE. 206  
MIAMI, FL 33178 US

FEI Number: 20-0189717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

RUIZ, EDGAR  
4626 NW 111 CT  
DORAL  
FL, FL 33178 US

**Name and Address of New Registered Agent:**

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

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: D ( ) Delete  
Name: CONTRERAS, MORELLA  
Address: 11224 NW 79 LN  
City-St-Zip: DORAL, FL 33178

Title: VP ( ) Delete  
Name: RUIZ, EDGAR R  
Address: 603 FINE DR. STE. 417  
City-St-Zip: SALT LAKE CITY, UT 84119 US

Title: D (X) Delete  
Name: RUIZ, IRAIDA B  
Address: 603 FINE DR. STE. 417  
City-St-Zip: SALT LAKE CITY, UT 84119 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RUIZ, IRAIDA PRES  
Address: 4626 NW 111 CT  
City-St-Zip: DORAL, FL 33178

Title: VP (X) Change ( ) Addition  
Name: RUIZ, EDGAR R  
Address: 4626 NW 111 CT  
City-St-Zip: DORAL, FL 33178 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDGAR RUIZ

VP

05/14/2009

Electronic Signature of Signing Officer or Director

Date