

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000100792

Entity Name: NUTRI-PLUS CORP.

FILED  
Mar 29, 2007  
Secretary of State

## Current Principal Place of Business:

13876 SW 56TH ST  
441  
MIAMI, FL 33175

## New Principal Place of Business:

1406 NE 16TH TER  
CAPE CORAL, FL 33909

## Current Mailing Address:

13876 SW 56TH ST  
441  
MIAMI, FL 33175

## New Mailing Address:

1406 NE 16TH TER  
CAPE CORAL, FL 33909

FEI Number: 20-0382277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNANDEZ, MAYKEL  
13876 SW 56TH ST  
441  
MIAMI, FL 33175 US

## Name and Address of New Registered Agent:

HERNANDEZ, MAYKEL  
1406 NE 16TH TER  
CAPE CORAL, FL 33909 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: MAYKEL HERNANDEZ

03/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HERNANDEZ, HUMBERTO  
Address: PO BOX 601661  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: DV ( ) Delete  
Name: RODRIGUEZ, IDANIA  
Address: PO BOX 601661  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: DS ( ) Delete  
Name: HERNANDEZ, MAYKEL  
Address: 13876 SW 56TH ST SUITE # 441  
City-St-Zip: MIAMI, FL 33175

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HERNANDEZ, HUMBERTO  
Address: 1406 NE 16TH TER  
City-St-Zip: CAPE CORAL, FL 33909

Title: DV (X) Change ( ) Addition  
Name: RODRIGUEZ, IDANIA  
Address: 1406 NE 16TH TER  
City-St-Zip: CAPE CORAL, FL 33909

Title: DS (X) Change ( ) Addition  
Name: HERNANDEZ, MAYKEL  
Address: 1406 NE 16TH TER  
City-St-Zip: CAPE CORAL, FL 33909

I hereby certify that the information supplied with this filing does not qualify for the 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: MAYKEL HERNANDEZ

DS

03/29/2007

Electronic Signature of Signing Officer or Director

Date