## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000110558

Entity Name: NUTRALAB RESEARCH INC

FILED Oct 09, 2007 Secretary of State

4911 FALLCREST CIRCLE SARASOTA, FL 34233 US

Current Mailing Address: New Mailing Address:

4911 FALLCREST CIRCLE SARASOTA, FL 34233 US

FEI Number: 02-0727995 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

JOHANSEN, THOR V 4911 FALLCREST CIRCLE SARASOTA, FL 34233 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: THOR V JOHANSEN

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS ( ) Delete Title: PRFS (X) Change ( ) Addition Name: JOHANSEN, THOR V PRES Name: THOR V JOHANSEN, 4911 FALLCREST CIRCLE 4911 FALLCREST CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34233 US City-St-Zip: SARASOTA, FL 34233 US

Title: CHRM ( ) Delete Title: CHRM (X) Change ( ) Addition

Name: JOHANSEN, UNNI CHRMN Name: UNNI JOHANSEN,
Address: 4911 FALLCREST CIRCLE Address: 4911 FALLCREST CIRCLE

Address: 4911 FALLCREST CIRCLE Address: 4911 FALLCREST CIRCLE
City-St-Zip: SARASOTA, FL 34233 US City-St-Zip: SARASOTA, FL 34233 US

( ) Delete Title: Title: (X) Change ( ) Addition JOHANSEN, CHRISTOPHER VP CHRISTOPHER D JOHANS, EN Name: Name: 4911 FALLCREST CIRCLE 4911 FALLCREST CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34233 FL City-St-Zip: SARASOTA, FL 34233 FL

Title: () Delete Title: SECR (X) Change ( ) Addition PETERSON, RUSSELL V SR VP THOR M JOHANSEN, Name: Name: Address: 748 WEST 1650 NORTH Address: 4911 FALLCREST CIRCLE City-St-Zip: OREM, UT 84057 US City-St-Zip: SARASOTA, FL 34233

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 MARTINEZ, CHAS C VP
 Name:

 Address:
 2715 SAFE HARBOR DRIVE
 Address:

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SQUIRES, EVELYN VP
 Name:

 Address:
 2027 IVY PLACE
 Address:

 City-St-Zip:
 SARASOTA, FL 34235
 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: THOR V JOHANSEN PRES 10/09/2007

Electronic Signature of Signing Officer or Director

Date