2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000166013

DAVIE, FL 33324

City-St-Zip:

Entity Name: NUTRITION OCEAN, INC.

FILED Apr 30, 2007 Secretary of State

	11011110110100000111100	
Current Principal Place of Business:		New Principal Place of Business:
2420 S.W. 81ST AVENUE, #7-402 DAVIE, FL 33324		12594 PINES BLVD 105 PEMBROKE PINES, FL 33027
Current N	lailing Address:	New Mailing Address:
2420 S.W. 81ST AVENUE, #7-402 DAVIE, FL 33324		12594 PINES BLVD 105 PEMBROKE PINES, FL 33027
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X) Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
CUMMINGS-GRAYSON & CO., INC. 815 N W 1ST AVENUE MIAMI, FL 33136 US		MORGANS FINANCIAL 4111 STIRLING RD 202 FT LAUDERDALE, FL 33314 US
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE: EARL MORGAN	04/30/2007
Election Oc	Electronic Signature of Registered A	gent Date
Election Cal	mpaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P () Delete SEWELL, MELBOURNE 2420 S.W. 81ST AVENUE, #7-402 DAVIE, FL 33324	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete WOODBINE, BETHUNE 2420 S.W. 81ST AVENUE, #7-402 DAVIE, FL 33324	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete SEWELL, WINSLOW 2420 S.W. 81ST AVENUE, #7-402 DAVIE, FL 33324	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address:	T () Delete SEWELL, ALTREISHA 2420 S.W. 81ST AVENUE, #7-402	Title: () Change () Addition Name: Address:

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.

City-St-Zip:

SIGNATURE: MELBOURNE SEWELL P 04/30/2007