2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041237

Entity Name: NUTRITION BY DESIGN, INC.

AVENTURA, FL 33180 US

City-St-Zip:

FILED Jan 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 21110 BISCAYNE BLVD. 3331 SW 49 STREET SUITE 205 HOLLYWOOD, FL 33312 US AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 3331 SW 49 STREET HOLLYWOOD, FL 33312 US FEI Number: 20-4618805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WINTON, GLORIA A 3801 N.E. 207 STREET APT. 1702 AVENTURA, FL 33180 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WINTON, STACY J Name: Name: 3331 SW 49 STREET Address: Address: City-St-Zip: HOLLYWOOD, FL 33312 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: WINTON, GLORIA A Name: 3801 NE 207 STREET, APT 1702 Address: 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: STACY WINTON P 01/12/2008