

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000062112

Entity Name: SIESTA NUTRITION & VITAMINS, INC.

FILED
Jan 21, 2007
Secretary of State

Current Principal Place of Business:

6597 S. TAMIAMI TRAIL
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

6597 S. TAMIAMI TRAIL
SARASOTA, FL 34231

New Mailing Address:

2548 CARLISLE PLACE
SARASOTA, FL 34231

FEI Number: 20-4821156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNESKI, PETER ESQ.
19 WEST FLAGLER STREET
SUITE 807, BISCAYNE BLDG.
MIAMI, FL 33130 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MASTROTOTARO, LOUISE
Address: 6597 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MASTROTOTARO, LOUISE
Address: 2548 CARLISLE PLACE
City-St-Zip: SARASOTA, FL 34231

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: LOUISE MASTROTOTARO

PRES

01/21/2007

Electronic Signature of Signing Officer or Director

Date