

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000079431

FILED  
Mar 27, 2007  
Secretary of State

Entity Name: BISCAYNE NUTRITION CENTER, INC.

**Current Principal Place of Business:**

1966 N.E. 123RD ST  
PMB 162  
N. MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

1966 N.E. 123RD ST  
PMB 162  
N. MIAMI, FL 33181

**New Mailing Address:**

FEI Number: 20-5023290      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ANNUNZIATA, VINCENT  
13160 BISCAYNE BLVD.  
N. MIAMI, FL 33181      US

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

ANNUNZIATA, VINCENT  
271 SW 12TH ST  
POMPANO BEACH, FL, FL 33060      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

03/27/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: PALUMBO, RHUS  
Address: 13160 BISCAYNE BLVD.  
City-St-Zip: N. MIAMI, FL 33181

Title: DVS ( ) Delete  
Name: ANNUNZIATA, VINCENT  
Address: 13160 BISCAYNE BLVD.  
City-St-Zip: N. MIAMI, FL 33181

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: PALUMBO, RHUS  
Address: 1966 NE 123RD ST  
City-St-Zip: N. MIAMI, FL 33181

Title: DVS (X) Change ( ) Addition  
Name: ANNUNZIATA, VINCENT  
Address: 1966 NE 123RD ST  
City-St-Zip: N. MIAMI, FL 33181

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: RHUS PALUMBO

Electronic Signature of Signing Officer or Director

DPT

03/27/2007

Date