

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000018788

Entity Name: NATURALLY HEALTHY, INC.

FILED
Dec 04, 2008
Secretary of State

Current Principal Place of Business:

4611 SOUTH UNIVERSITY DRIVE SUITE 224
FORT LAUDERDALE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4611 SOUTH UNIVERSITY DRIVE SUITE 224
FORT LAUDERDALE, FL 33328

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, GOAR N
4611 SOUTH UNIVERSITY DRIVE SUITE 224
FORT LAUDERDALE, FL 33328 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: GOAR ALVAREZ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: ALVAREZ, GOAR PRES
Address: 4611 SOUTH UNIVERSITY DRIVE #224
City-St-Zip: FT. LAUDERDALE, FL 33328

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: GOAR ALVAREZ

Electronic Signature of Signing Officer or Director

PRES

12/04/2008

Date