2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P07000117138

Entity Name: HEALTHY NUTRISOLUTIONS CORPORATION, INC

Current Principal Place of Business:

8046B PRESIDENTS DR
C
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

8046B PRESIDENTS DR
C
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 26-1321114 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIDALGO, MARCEL
7728 PAX CT
ORLANDO, FL 32822 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: P ( ) Delete
Name: AGOSTINI, AUGUSTO
Address: 3671 DERBYSHIRE RD
City-St-Zip: CASSELBERRY, FL 32707

Title: VP ( ) Delete
Name: HIDALGO, MARCEL
Address: 7728 PAX CT
City-St-Zip: ORLANDO, FL 32822

Title: T ( ) Delete
Name: ROGEWITZ, JOSEPH O JR
Address: 3425 SUGAR MILL RD
City-St-Zip: KISSIMMEE, FL 34741

Title: S ( ) Delete
Name: UMBRA, ALEX
Address: 4377 COMMERCIAL WAY
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
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: MARCEL HIDALGO VP 04/29/2008

Electronic Signature of Signing Officer or Director Date