2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000088852

Entity Name: NUTRABEAUTIFUL. INC.

Address:

City-St-Zip:

9295 SW MICHELE DRIVE

STUART, FL 34997

FILED May 01, 2009 Secretary of State

Entity Nai	me: NUTRABE	AUTIFUL,	, INC.			
Current Principal Place of Business:				New Principal Place of Business:		
383 NE BA STUART,	AKER ROAD FL 34994					
Current Mailing Address:				New Mailing Address:		
383 NE BA STUART,	AKER ROAD FL 34994					
FEI Number:		FEI Numb	er Applied For (X)	FEI Number Not Applicable	() Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
5647 110T ROYAL PA	STERED AGENT H AVENUE NOI ALM BEACH, FL named entity su of Florida.	RTH 33411	US s statement for the pr	urpose of changing its regi	istered office or registered agent, or both,	
SIGNATU	RE:					
Electronic Signature of Registered Agen				nt	Date	
	ce with s. 607.193(mpaign Financing	, , , , .	•	receive the prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E WELKER, NANC' 4040 NE SUGARI JENSEN BEACH,	HILL AVENU	JE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () E WELKER, ROGE 4040 NE SUGAR JENSEN BEACH,	HILL AVENU	JE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V ()[WADE: MABEL	elete		Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: NANCY WELKER PRES 05/01/2009