

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000001676

Entity Name: HERBALVIDA INC

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2789 BURWOOD AVE  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

2789 BURWOOD AVE  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 27-4452469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VARGAS, ROOSEVELT  
2789 BURWOOD AVENUE  
ORLANDO, FL 32837 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: VARGAS, ROOSEVELT  
Address: 2789 BURWOOD AVENUE  
City-St-Zip: ORLANDO, FL 32837

Title: D  
Name: PEREZ, MARIA F  
Address: 2789 BURWOOD AVENUE  
City-St-Zip: ORLANDO, FL 32837

I hereby 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 all other like empowered.

SIGNATURE: ROOSEVELT VARGAS

D

02/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date