FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000026785 (4)

NATURAL HIGH, INC.

Mailing Address

Principal Place of Business

FILED May 05 1998 8:00am Secretary of State



VERO BEACH US		2044 TREASURE COAST P 1235 U.S. ROUTE NO. 4 VERO BEACH FL 32960 US	PLAZA	DO NOT WRITE IN THIS SP 3. Date Incorporated or Qualified 04/09/1993	
21 3044 Sulte, Apt.	Theasur Coat Plaza	26 And Tressus Suite, Apt. #, etc.	Coast Plaz	4. FEI Number 65-0405296	Applied For Not Applicable
Qity & State		27	·-··	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 VEE0	BEACH, FL	28 VERO BEACH		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3Q	960 25 USA		Country USA		Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DAS RDH ICE I 81 Name					
DAS, BRUCE 3				,	
			82 Street	Address (P.O. Box Number is Not Acceptable)	
2044 TREASURE COAST PLAZA VERO BCH EL 2000					
VE	RO BCH FL 32960		63		
			84 City	F <u>L</u>	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typicd or printed name of tegistered agreet and title if approaching (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change
NAME	DAS, BRUCE J		1.2 NAME	•	
STREET ADDRESS	2160 CAPTAINS WALK		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BCH FL		1.4 CITY-ST-ZIP	32960	,
TITLE	Ď	DELETE	2.1 TITLE		Change
NAME	DAS, AMY		2.2 NAME	DAS, AMY	`
STREET ADDRESS	840 39TH CT CW		2.3 STREET ADDRESS	DAS, AMY 2160 Captains Walk VERO BCH, FL 32960	
CITY-ST-ZIP	YERO BCH FL		2. 4 CITY - ST - ZIP	VERO BCH. FL 32960	
TITLE		☐ DELET e	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME	:		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CITY - ST - ZIP		
TITLE		☐ DELE te	51 TITLE		Change
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	6.4 CITY - ST - ZIP		
14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.					