

# 2000 UNIFORM BUSINESS REPORT (UBR)

192

DOCUMENT # P93000065806

1. Entity Name

**NUTRILIFE I, INC.**

FILED

02 MAR 26 PM 3:36

SECRETARY OF STATE -  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

503 CLEVELAND STREET  
SUITE 120-C  
CLEARWATER, FL 33755

c/o PERFECTLY BALANCED BOOKS  
133 GARDEN AVE. NORTH  
CLEARWATER, FL 33755

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3247980

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOE PEREIRA  
503 CLEVELAND STREET  
SUITE 120-C  
CLEARWATER, FL 33755

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Joe Pereira - President

December 29, 2001

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☐ Delete  
NAME Joe Pereira  
STREET ADDRESS 503 Cleveland Street, Suite 120-C  
CITY-ST-ZIP Clearwater, FL 33755

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joe Pereira

December 29, 2001 727-445-1188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

00-01-UBR

00-02-UBR

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**NUTRILIFE I, INC.**  
**c/o Perfectly Balanced Books**  
**133 Garden Ave. North**  
**Clearwater, FL 33755**

March 18, 2002

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
PO Box 6327  
Tallahassee, FL 32314

Regarding: Nutrilife, Inc. – Doc.# P93000065806

To Whom It May Concern:

In December 2001 Annual Reports were filed for years 2000 & 2001 for Nutrilife, Inc. The report and payment was returned with a letter (please find enclosed) from your office stating that this corporation had been dissolved and that the name was no longer available. I called your office and spoke to an agent and this person informed me that I needed to file an Articles of Amendment changing the original corporation's name, file the returned Annual Report with the adjustment noted on the document, and enclose payment for 3 years of dues. The name change we have made to the original name is the addition of the Roman Numeral I directly after the name Nutrilife, which was approved by your office over the phone.

Enclosed please find check number 17035 in the amount of \$552.50, which represents payment for the following:

Annual Dues 2000	\$150
Annual Dues 2001	\$150
Annual Dues 2002	\$150
Amendment Filing Fee	\$35
Cert. Copy of Amendment	\$8.75
Cert. of Status	\$8.75
Fictitious Name Renewal	\$50
<b>Total</b>	<b>\$552.50</b>