FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Mar 11, 2002 8:00 am DOCUMENT # Secretary of State P94000016113 1. Entity Name 03-11-2002 90037 002 ***150.00 **NUTRACEUTICS CORPORATION** Principal Place of Business Mailing Address C/O HOWARD H. KAPLAN, ESQ. C/O HOWARD H. KAPLAN. ESQ. 168 N. MERAMEC AVE., 4TH FLOOR 168 N. MERAMEC AVE., 4TH FLOOR ST. LOUIS MO 63105-3763 ST. LOUIS MO 63105-3763 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0474565 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS (10/6) TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME JAMIESON, JENNIFER STREET ADDRESS STREET ADDRESS **45 PORTLAND PLACE** CITY-ST-ZIP CITY-ST-ZIP ST. LOUIS MO 63108 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information substied 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 received 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

SIGNATURE: X

changed, or on an attachment

FREQUIPSENDER JAMIESON, PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(314) 371-1101

attachment 00000016113/507869

BLUMENFELD

KAPLAN &

SANDWEISS, A SECRETARY WELL OFFICE A SECRETARY OF THE SECRETARY

168 NORTH MERAMEC AVENUE

ST. LOUIS, MISSOURI 63105

A MAN TO THE CONTROL OF THE

FACSIMILE (314) 863-9388

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P.C.

ATTORNEYS AT LAW

February 20, 2002

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

RE:

2002 Uniform Business Report

Nutraceutics Corporation

Document No.: P94000016113

Dear Sir/Madam:

Enclosed please find the 2002 Uniform Business Report for the above-referenced corporation, as well as a check in the amount of \$150.00 in payment of the filing fee. Please cause this document to be filed and return a file-stamped copy to the undersigned.

Thank you for your cooperation. If you have any questions, please do not hesitate to call.

Very truly yours,

BLUMENFELD, KAPLAN & SANDWEISS, P.C.

Howard H. Kaplan

HHK/cg Enclosure

cc: Ms. Jennifer Jamieson (w/ enc.)