Jan 27, 2003 8:00 am

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Secretary of State P94000016113 DOCUMENT # 01-27-2003 90152 046 ***150.00 1. Entity Name 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 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. 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. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** TITLE Delete TITLE Change ☐ Addition JAMIESON, JENNIFER NAME NAME **45 PORTLAND PLACE** STREET ADDRESS STREET ADDRESS ST. LOUIS MO 63108 CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete_ TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRÉSS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI.E Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with a

SIGNATURE AND TYPED OR PRINTED NAME

JENNIFER JAMIEUN, PRELIDENT

12. 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 eport is five 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

BLUMENFELD KAPLAN & SANDWEISS

P.C.

ATTORNEYS AT LAW

Afferdments

168 NORTH MERAMEC AVENUE ST. LOUIS, MISSOURI 63105 TELEPHONE (314) 863-0800 FACSIMILE (314) 863-9388

3201 S. PROVIDENCE • SUITE 101 COLUMBIA, MO 65205-4000 TELEPHONE (573) 234-0800

WWW.BKS-LAW.COM

January 22, 2003

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

Re:

2003 Uniform Business Report

Nutraceutics Corporation

Document No.: P94000016113

Dear Sir/Madam:

Enclosed please find the 2003 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/encl.)