

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000052580

FILED
Feb 07, 2006
Secretary of State

Entity Name: GLOBAL NUTRITIONAL CONCEPTS, INC.

Current Principal Place of Business:

1825 NW 38TH AVE
LAUDERHILL, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

9990 S.W. 77TH AVENUE
STE. 330
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 65-0505508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARGOLIS, JOHN A ESQ.
9990 S.W. 77 AVENUE
SUITE 330
MIAMI, FL 331562699 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTELLESE, DONALD E
Address: 1825 NW 38TH AVE
City-St-Zip: LAUDERHILL, FL 33311

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: MONTELLESE, DONALD E
Address: 1825 NW 38TH AVE
City-St-Zip: LAUDERHILL, FL 33311

Title: PD () Change (X) Addition
Name: GONZALEZ, ISMAEL
Address: 1825 NW 38TH AVE
City-St-Zip: LAUDERHILL, FL 33311

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ISMAEL GONZALEZ

PD

02/07/2006

Electronic Signature of Signing Officer or Director

_____ Date