## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Mar 08, 2004 08:00 AM **DOCUMENT # P94000078932 Secretary of State** 1. Entity Name NU-LIFE NUTRACEUTICALS, INC. Mailing Address Principal Place of Business 5265 S.E. WILLIAMS WAY 5265 S.E. WILLIAMS WAY STUART, FL 34997 US STUART, FL 34997 US No Chg-P CR2E034 (10/03) 03042004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0950720 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent KWEK, CAROL DO NOT WRITE 5265 S.E. WILLIAMS WAY STUART, FL 34997 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE KWEK, CAROL U00000080951 03/08/04-80129-025 150.00 NAME STREET ADDRESS 5265 S.E. WILLIAMS WAY STUART, FL 34997 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Daytime Phone #