FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000053192 (7)**

1. Corporation Name

VIDA VIVA NATURAL PRODUCTS, INC.

Principal Place of Business	Mailing Address
1490 S. MIAMI AVE. MIAMI FL 33130	1490 S. MIAMI AVE. MIAMI FL 33130

3. Date Incorporated or Qualified: 07/11/1995
3a. Date of Last Report:

2. Principal Place of Business
21: 1920 E.Hallandale Beach
22 Suite, Apt. #, etc.: Suite 639
23 City & State: Hallandale, Fl
24 Zip: 33009
25 Country: USA

2a. Mailing Address
26: 540 Brickell Key Dr.
27 Suite, Apt. #, etc.: Apto # 401
28 City & State: Miami Fl
29 Zip: 33131
30 Country: USA

4. FEI Number: 65-0596146 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MUHARRAM, FERNANDO C.L.
1490 S. MIAMI AVE.
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name: Ary Buarque de-Gusmao Junior
82 Street Address (P.O. Box Number is Not Acceptable): 540 Brickell Key Dr. # 401
83:
84 City: Miami **FL** 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] ARY BUARQUE DE-GUSMAO JUNIOR SD JUNE 5, 1996
(Signature required of new Registered Agent) (If the Registered Agent is a corporation, the signature must be that of an officer or director of the corporation) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ ~~MUHARRAM, FERNANDO C.L.~~ ~~540 BRICKELL KEY DR., #706~~ ~~MIAMI FL 33131~~	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PD Contabil Gusmao S/C Ltda R.Sao Luis 49 Centro Osasco SP 06093-040 Brazil	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ ~~MUHARRAM, ADHEMAR M~~ ~~540 BRICKELL KEY DR., #706~~ ~~MIAMI FL 33131~~	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	SD Ary Buarque de-Gusmao Junior 540 Brickell Key Dr. # 401 Miami Fl. 33131	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	500001898855 -07/19/96--01006--015 ***225.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] ARY BUARQUE DE-GUSMAO JUNIOR JUNE 5 1996 (305)3195700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #