FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000004858 (2)

NUTRI-CEUTICALS, INC.

Principal Place of Business

Mailing Address

FILED
May 08 1998 8:00am
Secretary of State



2101 NW 33RD STREET. STE. 2000A POMPANO BEACH FL 33069			2101 NW 33RD STREET, STE. 2000A POMPANO BEACH FL 33069		•	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						<u> 16/1996</u>				
<u> </u>	ace of Business	2a. Mailing Address			4, FEI Nur			+-	plied For	
Suite, Apt. #, etc.		Suite Ant # ete	Suite, Apt. #. etc.			-0638932	ė.		t Applicable	
22		·	27			ate of Status Desired		Fee Re		
City & State		City & State	↓		6. Election	Campaign Financing	\$	5.00	May Be	
23		28			Trust Fu	and Contribution		Added t		
Zip	Country	Zip	Count	У		8. This corporation owes or has paid the current year Intangible				
24	25 g, Name and Address of Curre	29				Personal Property Tax due June 30. Yes No				
	ERKOWITZ, BARRY	it nogistered Agent	Name_	···			•			
		13A			ARRY BERKOWITZ					
	77 82 Heather Ridge Lane OCA Raton FL 33498		82 Street Add			dress (P.O. Box Number is Not Acceptable)				
0	WALLER OF THE SALES		83			2000-F				
			8		WITE		30	Zip (Code 4 A	
			i -	POI	MPANO	BFACH	FLI	3	3064 L	
11. Pursuant t office or re	o the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Sta tul Fof Florida: Such chan ge wa s	tes, the abo authorized t	ve-named co by the corpor	ration systemit ration's board of	s this statement for the directors. hereby acc	purpose of char ept the appointm	nging it: ofnt as	s registered registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation symmits 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 in board of gire drops, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	Signature: typed or printed name of registered by	~~ ~ ~ ~ ~ ~ ~ ~	II : Begistered A	ocal signature red	Titled when reinsteam			70		
12.		D DIRECTORS	13.		(NS/CHANGES TO OFF	ICERS AND DIR	ECTOR	S IN 12	
TITLE	V	☐ DELETE	1.1 THTLE					hange	Addition	
NAME	DE CARVALHO, ROBERTO PORTO		1.2 NAME							
STREET ADDRESS	2101 NW 33RD STREET, SUITE 2000A			1.3 STREET ADDRESS						
CITY-ST-ZIP	POMPANO BEACH FL 33069		1.4 CITY							
TITLE	P DELETE		1	2.1 TITLE			LJ (hange	Addition (
NAME	LEVY, MOYSES 2101 NW 33RD STREET, SUITE 2000A		2.2 NAME							
STREET ADDRESS	POMPANO BEACH FL 330		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP							
CITY-ST-ZIP TITLE	V DELETE		3.1 TITLE					hange	Addition	
NAME	BERKOWITZ, BARRY J		3.2 NAME							
STREET ADDRESS	2101 NW 33RD STREET, SUITE 2000A			ET ADDRESS					-	
CITY-ST-ZIP	POMPANO BEACH FL 33069		3.4. CITY							
TITLE	V J DELETE		4.1 THILE					hange	Addition	
NAME	STEINBERG, MELVYN		4. 2 NAM	E						
STREET ADDRESS	2101 NW 33RD STREET, SUITE 2000A		4.3 STRE	ET ADDRESS						
CITY-ST-ZIP			4.4 CITY	ST-ZIP						
TITLE			5.1 TITLE					hange	☐ Addition	
NAME			5.2 NAME							
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP		☐ DELETE	5.4 CITY					hance	Addition	
TITLE	•	ווי אנונונ	6.1 TITLE					hange	LI AUGILION	
NAME OTDEET ADDRESS			6.2 NAME							
STREET ADDRESS				E1 ADDRESS						
CITY-ST-ZIP		all this file a deep and a self.	6.4 CITY		. 0 440 0	7/2)/i) Florido Statutos	1 f	4 dla -		

If 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 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 reported 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.

*APPU T BEOVERU

4/28/98 954-972-440