

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90179 035 \*\*\*150.00

**DOCUMENT # P96000086205**

1. Entity Name  
NATURAL VITA INTERNATIONAL, CORP.



Principal Place of Business

5600 S.W. 135 AVENUE  
#409  
MIAMI, FL 33183 US

Mailing Address

5600 S.W. 135 AVENUE  
#409  
MIAMI, FL 33183 US

94069464

2. Principal Place of Business

7400 NW 7 ST

3. Mailing Address

7400 NW 7 ST

Suite, Apt. #, etc.

#201

Suite, Apt. #, etc.

#201

City & State

Miami FL

City & State

Miami FL

Zip

33126

Country

USA

Zip

33126

Country

USA

04122004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0701243

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORONADO, VICTOR N  
6546 S.W. 18 STREET  
MIRAMAR, FL 33023

7. Name and Address of New Registered Agent

Name: Victor N. Coronado  
Street Address (P.O. Box Number is Not Acceptable):  
5401 Madison St.  
City: Hollywood FL Zip Code: 33021

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**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE: PD  
NAME: CORONADO, VICTOR N  
STREET ADDRESS: 6546 S.W. 18 STREET  
CITY-ST-ZIP: MIRAMAR, FL 33023 ☐ Delete

TITLE: VD  
NAME: ZUNIGA, LUIS R  
STREET ADDRESS: 7344 S.W. 82 STREET  
CITY-ST-ZIP: MIAMI, FL 33143 ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
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STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ Addition

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STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICTOR N. CORONADO  
PRESIDENT

Date

Daytime Phone #

04/14/04 (305) 264-2828