## 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 # P97000050477 (3)

VITARICH LABORATORIES, INC.

**FILED** May 20 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			
2241 TRADE		2241 TRADE CENTER	WAY		
NAPLES FL 34109		NAPLES FL 34109			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					06/03/1997
2. Principal P	2a. Mailing Address	ailing Address		4. FEI Number Applied For	
21		26			65-076/669 Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.			SR 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		Cily & State			6. Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent
TH	OMAS, KEVIN			81 Name	
2241 TRADE CENTER WAY			,	82 Street	Address (D.O. Boy Number is Not described)
	PLES FL 34109			02) SHEEL	Address (P.O. Box Number is Not Acceptable)
110	1 120 7 1 04 105			63	
			ļ		
				84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	)2 and 607.1508, Flori <b>da S</b> ta	atutes, the ab	ove-named	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of Section 607.0505,	Florida Stati	utes.	porations board of directors, meleby accept the appointment as registered
SIGNATURE	Signature typed or printed having all registered agr	ent and title it applicable (f	NCITE. Registered	Agent signatur	e required whon (einstaing) DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TO	LE	PREIDENT Change PAddition
NAME	THOMAS, KEVIN		1.2 NA	ME	
STREET ADDRESS	2241 TRADE CENTER WAY		1.3 ST	REFT ADDRESS	
CITY-ST-ZIP	NAPLES FL 34109		1.4 CO	Y-ST-ZIP	
TITLE	-	☐ DELETE	2.1 10	LE	SEC TREAS Change Addition
NAME			2.2 NA	ME	JOHN STOME
STREET ADDRESS			2.3 \$1	REET ADORESS	2741 TRINE CENTER WAY
CITY-SY-ZIP			2. 4 CI	TY-ST-ZIP	NAUS, FL 34109
TITLE		☐ DELETE	3.1 TIT	LE	Change Addition
NAME			3.2 NA	ME	
STREET ADDRESS		1	3.3 ST	REET ADDRESS	
CITY-ST-ZIP			3 4. Ci	TY-SI-ZIP	
TITLE		☐ DELETE	4 1 Til		Change Addition
NAME			4. 2 N/	AME	
STREET ADDRESS			4.3 ST	REET ADDRESS	
CITY-ST-ZIP			1	Y-ST-ZIP	
TITLE		DELETE	5.1 TIT	LE	Change Addition
NAME			5.2 NA		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				Y-SI-ZIP	
TITLE		DELETE	61 111		Change Addition
NAME		had week to	6.2 NA		
STREET ADDRESS				HEET ADDRESS	
CITY-ST-ZIP	and that the information conclined u	uth this filian door not qualif		Y-ST-ZIP	ed in Section 119 07/3V(). Florida Statutes I fullbur certify that the information

remove certify that the information supplies with this little information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustoe 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.

ROD. I NAM