

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # P97000093275 (0)

1. Corporation Name

VIDA SANA CORPORATION

Principal Place of Business

P.O. BOX 347251
CORAL GABLES FL 33134

Mailing Address

P.O. BOX 347251
CORAL GABLES FL 33134

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

INGRAM, NADIA
2100 PONCE DE LEON BLVD.
SUITE 920
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

10/30/1997

4. FEI Number

65-0794497

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME BODIN, GLORIA R
STREET ADDRESS 4091 PARK AVENUE
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE SVD ☐ DELETE

NAME BODIN, ERIC
STREET ADDRESS P.O. BOX 347251 1529 N.W. South
CITY-ST-ZIP CORAL GABLES FL 33134 DUNE DRIVE

TITLE MIAMI- FL 33125 ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ 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

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME 500002701715-6

1.3 STREET ADDRESS -12/03/98--01061--019

1.4 CITY-ST-ZIP *****150.00 *****150.00

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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:

4/15/98 402-305

CR2E034 (10/97)

2012

LAW OFFICES OF
GLORIA ROA BODIN, P.A.
(Formerly Gloria Roa Josepher, P.A.)
2100 Ponce De Leon Boulevard
Suite 920
Coral Gables, Florida 33134

Tel: (305) 442-1322/Fax: (305) 444-7578
E-mail: gglobo@aol.com

GLORIA ROA BODIN
NADIA INGRAM

GLORIA I. CORTES-LEGAL ADMINISTRATOR
NATALIE SANCHEZ-PARALEGAL
RAQUEL VAZ-LEGAL ASSISTANT

November 17, 1998.

Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Subject: VISA SANA CORPORATION
Ref: Number: P97000093275

Dear Sir/Madam:

We recently discovered your attached correspondence which was left in a file by an employee who had been discharged. We did however, file the application in time. Therefore, we ask that you allow filing at this time as this was a harmless error.

Very truly yours,

GLORIA ROA BODIN, P.A.



Gloria Roa Bodin

GRB/G421