2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000100280

Entity Name: NUTRITION & HEALTH EDUCATOR, INC.

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1628 REGAL OAK DR. 1539 HEIGHTS BLVD, KISSIMMEE, FL 34744 SUITE-2

HOUSTON, TX 77008

Current Mailing Address: New Mailing Address:

1628 REGAL OAK DR.
KISSIMMEE, FL 34744

1539 HEIGHTS BLVD,
SUITE-2
HOUSTON, TX 77008

FEI Number: 59-3484336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIANA CHAUVIN R.PH, B.C.N.S.P.

1628 REGAL OAK DRIVE
KISSIMMEE, FL 34744 US

ANGELA, GANTT CPA
3359 WEST VINE STREET
SUITE 104
KISSIMMEE, FL 34741 US

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.

SIGNATURE: ANGELA GANTT 04/22/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 CHAUVIN, DIANA C
 Name:
 CHAUVIN, DIANA C

 Address:
 1628 REGAL OAK DR.
 Address:
 1539 HEIGHTS BLVD,

 City-St-Zip:
 KISSIMMEE, FL 34744
 City-St-Zip:
 HOUSTON, FL 77008

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA C CHAUVIN P 04/22/2008