

FILED
May 02, 2000 8:00 am
Secretary of State

CORPORATION
ANNUAL REPORT
2000



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

[Handwritten mark]

Read Notice and Instructions on Other Side Before Making Entries.

Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

DOCUMENT # P 98 0000 13471

SMOKER'S VITAMINS, INC.
500 SOUTH AUSTRALIAN AVENUE
SUITE 110
WEST PALM BEACH, FL 33401

If above address is incorrect in any way, enter the correct address
in item 2. Include Zip Code.

2. If

address below, P.O. Box number alone is NOT sufficient. The NAME
of the corporation can be changed only by filing an amendment.

Street Address 21

211 ROYAL POINCIANA WAY SUITE A

P.O. Box No. 22

City and State 23

PALM BEACH, FL

Zip Code 24

33480

3. Date Incorporated or Qualified
To Do Business in Florida

02/09/1988

4. FEI Number

65 0822136

☐ FEI Number Applied For
☐ FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
D	HARALD DUDE	211 Royal Poinciana Way Suite A	Palm Beach, FL	

500003283055--1
-06/09/00--01084--008
1270.00 *150.00

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

HARALD DUDE
211 Royal Poinciana Way Suite A
Palm Beach, FL 33480

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on:

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____
(Registered Agent Accepting Appointment)

DATE _____

10. I 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 effects as if made under oath. I further certify 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, F.S.

Signature

[Handwritten Signature]

HARALD DUDE, PRESIDENT

Date

4/20/2000

Typed Name of Signing Officer or Director
HARALD DUDE

Title

president

Telephone Number

561 833 4433

11. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED



\$5 Additional Fee
required for a
Certificate of Status