2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000026933

Entity Name: SUNCOAST VITAMINS, INC.

FILED Apr 28, 2003 Secretary of State

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

5416 FRUITVILLE RD SARASOTA, FL 34232 US

Current Mailing Address: New Mailing Address:

5416 FRUITVILLE RD SARASOTA, FL 34232 US

FEI Number: 65-0837344 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:

SHIELDS, DORIS HERMAN
5416 FRUITVILLE SHIELDS
5416 FRUITVILLE RD
SARASOTA, FL 34232
5416 FRUITVILLE RD
SARASOTA, FL 34232

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: THOMAS E. HERMAN 04/28/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: DP () Delete Title: DV (X) Change () Addition Name: SHIELDS, DORIS HERMAN Name: SHIELDS, DORIS HERMAN

Address: 1461 MAIN ST. Address: 1461 MAIN ST.

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

Title: DV () Delete Title: DP (X) Change () Addition Name: HERMAN, THOMAS E

 Address:
 1461 MAIN ST.
 Address:
 5816 BEE RIDGE RD.

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 SARASOTA, FL 34233

 Name:
 HERMAN, ROCHELLE
 Name:
 HERMAN, ROCHELLE

 Address:
 1461 MAINS T
 Address:
 5816 BEE RIDGE RD.

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS E. HERMAN DP 04/28/2003