2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000100104

PAT M. FOWLER, P.A.

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

TITLE

TITLE NAME

TITLE

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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155-5 BLANDING BLVD. **ORANGE PARK FL 32073**

9. This corporation is eligible to satisfy its Intangible

MACKOUL, MARK A

9252 SAN JOSE BLVD. #2704

JACKSONVILLE FL 32257

Tax filing requirement and elects to do so.

(See criteria on back)

PSTD

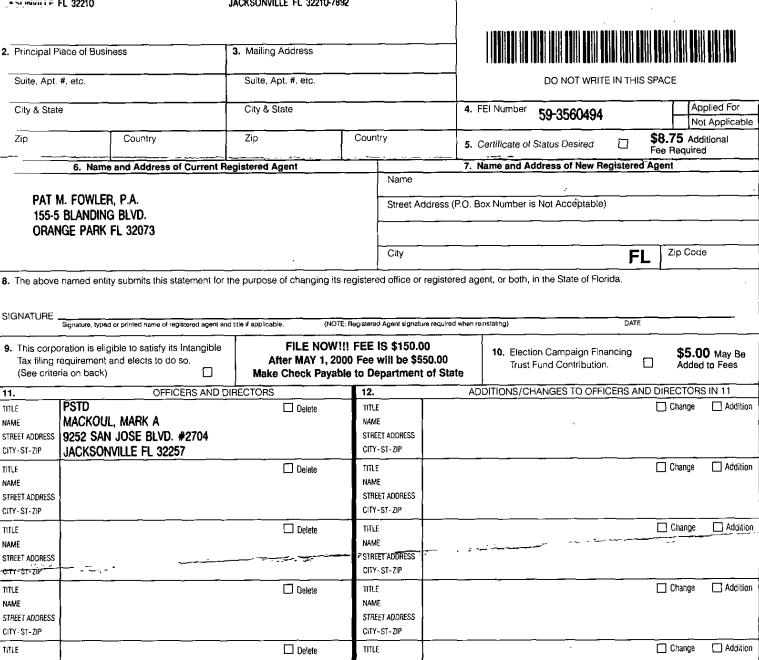
Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

NEW LIFE HEALTH FOODS, INC. Mailing Address Principal Place of Business 5128 BLANDING BLVD. BLANDING BLVD. SCHWING F FL 32210 JACKSONVILLE FL 32210-7892 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country 6. Name and Address of Current Registered Agent Name

FILED Apr 25, 2000 8:00 am Secretary of State

04-25-2000 90014 047 ***150.00



13. 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 report or supplemental 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 11 or Block 12 if

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE NAME STREET ADDRESS

NAME

SIGNATURE:

MARK A MACKOUL)

Change

Addition