

FILED  
Apr 21, 2003 8:00 am  
Secretary of State

04-21-2003 90503 008 \*\*\*150.00

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000087987

1. Entity Name

S & B NATURAL CORP.



70043143

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
8960 NW 8TH ST

3. Mailing Address  
8960 NW 8TH ST

Suite, Apt. #, etc.

105

Suite, Apt. #, etc.

105

City & State  
MIAMI, FL

City & State  
MIAMI, FL

4. FEI Number 65-0952940

Applied For

Not Applicable

Zip  
33172

Country  
US

Zip  
33172

Country  
US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name DINA BELLUCCI

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

8960 NW 8TH ST #105

City MIAMI

FL

Zip Code  
33172

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Dina Bellucci

Dina Bellucci

04-08-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1: Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
JHONNY BELLUCCI  
8960 NW 8TH ST #105  
MIAMI, FL 33172

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DINA BELLUCCI  
8960 NW 8TH ST #105  
MIAMI, FL 33172

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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12. 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 10 or on an attachment with an address, with all other like empowerments.

SIGNATURE:

Dina Bellucci

Dina Bellucci

04-08-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)