

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 10, 2000 8:00 am
Secretary of State

08-10-2000 90011 045 ***150.00

DOCUMENT # P99000090868



1. Entity Name
NUTRI-PLEX, INC.

Principal Place of Business 5317 N.W. 35TH TERRACE FORT LAUDERDALE FL 33309	Mailing Address 5317 N.W. 35TH TERRACE FORT LAUDERDALE FL 33309
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0955100	Applied For Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
COPANOS, JOHN
20 GATEHOUSE ROAD
SEA RANCH LAKES
FORT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent
 Name
COPANOS, JOHN S.
 Street Address (P.O. Box Number is Not Acceptable)
700 NE 7 AVE #4
 City
FT LAUDERDALE FL Zip Code
33304

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.

SIGNATURE *John S. Copanos* **JOHN S. COPANOS** 8/01/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COPANOS, JOHN 20 GATEHOUSE ROAD, SEA RANCH LAKES FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COPANOS, JOHN S. 700 NE 7 AVE #4 FT LAUDERDALE FL 33304 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John S. Copanos* **SIGNATURE REQUIRED COPANOS, PRESIDENT 954-292-7777**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

Nutri-Plex, Inc.

5317 N.W. 35th Terrace
Fort Lauderdale, FL USA 33309-6328
(954) 486-4590
(954) 486-4026 Fax

Attachment
DH P9900090858
DW78107

August 4, 2000

Department of State
Uniform Business Report
PO Box 1500
Tallahassee, FL 32302-1500

Re: Document #P99000090858

Dear Sirs:

I am writing in regards to the above referenced Uniform Business Report. The original and subsequent notices were sent to my mother's address and were not forwarded to me for payment. We are a new, small company (incorporated 11/99) and are still in the process of setting up our company for operation. I would greatly appreciate it if you could consider waiving the \$400.00 late fee and accept my check of \$150.00 (enclosed) as payment for the annual fees. This is our first experience with such filings and had the unfortunate experience of many items going to a former address.

Thank you in advance for your assistance. If you should need to contact me please feel free to call me direct at (954) 292-7777.

Sincerely,



John S. Copanos
President