

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000068390

**Entity Name:** NUTREEVIT INC.

**Current Principal Place of Business:**

4474 WESTON ROAD SUITE #258  
DAVIE, FL 33331

**Current Mailing Address:**

4474 WESTON ROAD SUITE #258  
DAVIE, FL 33331

**FEI Number:** 81-5012081

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BOLT, WAYMON  
4474 WESTON ROAD SUITE #258  
DAVIE, FL 33331 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BOLT, WAYMON  
Address        4474 WESTON ROAD SUITE #258  
City-State-Zip: DAVIE FL 33331

*I hereby 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 all other like empowered.*

**SIGNATURE:** WAYMON BOLT

**PRESIDENT**

**03/11/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date