2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000006056

Entity Name: TWINLAB CORPORATION

FILED Oct 19, 2004 Secretary of State

	Current Principal Place of Business:	New Principal Place of Business
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C/O IDEXSPHERE, INC.
3133 ORCHARD VISTA DR, SE
GRAND RAPIDS, MI 49546

C/O IDEASPHERE, INC.
3133 ORCHARD VISTA DR, SE
GRAND RAPIDS, MI 49546

GRAND RAPIDS, MI 49546

Current Mailing Address: New Mailing Address:

C/O IDEXSPHERE, INC.
3133 ORCHARD VISTA DR, SE
GRAND RAPIDS, MI 49546

C/O IDEASPHERE, INC.
3133 ORCHARD VISTA DR, SE
GRAND RAPIDS, MI 49546

GRAND RAPIDS, MI 49546

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: PRFS (X) Change () Addition HEACOCK, STEVE Name: Name: FOX, MARK A 3133 ORCHARD VISTA DR, SE 150 MOTOR PARKWAY, SUITE 210 Address: Address: City-St-Zip: GRAND RAPIDS, MI 49546 City-St-Zip: HAUPPAUGE, NY 11788

Title: () Delete Title: SEC () Change (X) Addition

Name:Name:HEACOCK, STEVEN RAddress:Address:3133 ORCHARD VISTA DRIVECity-St-Zip:City-St-Zip:GRAND RAPIDS, MI 49546

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: STEVEN R. HEACOCK SEC 10/19/2004