

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069695

FILED
Mar 13, 2007
Secretary of State

Entity Name: SPECIALTY NUTRITION PRODUCTS, LLC

Current Principal Place of Business:

ONE SOUTH OCEAN BOULEVARD, SUITE 300
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

ONE SOUTH OCEAN BOULEVARD, SUITE 300
BOCA RATON, FL 33432

New Mailing Address:

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

Name and Address of Current Registered Agent:

ANGELL CORPORATE SERVICES, INC.
ONE NORTH CLEMATIS STREET, SUITE 400
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: LORENZI, IRINA PRES
Address: ONE SOUTH OCEAN BLVD, SUITE 300
City-St-Zip: BOCA RATON, FL 33432 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES () Change (X) Addition
Name: LORENZI, IRINA PRES
Address: 1055 SW 11TH STREET
City-St-Zip: BOCA RATON, FL 33486 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: IRINA LORENZI

PRES

03/13/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date