FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



TEORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L04900

(1)

AMERICAN NUTRI-TECH, INC.

FILED Mar 25 1997 8:00am Secretary of State



Suite Agrid 1917	Principle Place of Basiness		Mailing Address	Mailing Address			T EMBLIMIT BUT FOUR COM COM MANA DON DION BUTT MAN MINI CHAN HOUR HOUR			
2. Principal Place of Baseries 2a. Maning Address 2a. Maning Addre	C/O DR. RITA JACKSON		844 LAURA STREET C/O DR. RITA JACKSON							
Selection Application Selection Application Selection Sele						***	1		leport	
Second Companies Second Comp	2. Principal i	has col Basocss	2a. Mailing Address							
27						58-1711718			ot Applicable	
Cry & State		#, E'`t	r			5. Certificate of Status Desired				
23				····		& Election Campaign Financing				
ACKSON, RTA BALLURA STREET FERNANDINA BEACH FL 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address 13. Street Address 14. Suppose to the processes of Sections 607 (668) paid 607 (668)	eren i					1				
9, Name and Address of Ourrent Registered Agent JACKSON, RITA 844 LAURA STREET FERNANDINA BEACH FL 32034 11. **Anguster** In the processes of Sex borns (AV 0642 and 607 1568 Ferida, Stables, the photo-remote corporation submite this statement for the purpose of changing its registered disease registered unset at each in the State of Trainals, State changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered in the state with a material value of accept the displaces of, Section 607 0505, Front Stables. 3CHARTIBE 12. OF STABLES 3CHARTIBE 13. SIRET ADRESS 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 3ACKSON, RITA 4ACKSON, RITA		Country	\$ \$	Country		8. This corporation has liability for	intangible t	ax under s	199.032	
STATE FERNANDINA BEACH FL 32034	24	1 1		30						
SAL AURA STREET			ent Registered Agent			10. Name and Address of New Re	gistered A	gent		
Second City File Second Secon				81	Name					
Solid State Solid Soli				82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)			
Section of the percentage of Sections 607 6562 and 607 1608 Fiorida Stables, the above named corporation submits this statement for the purpose of changing its register of diance or register of content and the Scale of Foods, Florida Stables Section of Joseph Content on the Company of the Composition of Stables Section of Codes, Florida Stables	FER	NANDINA BEACH FL 32034		92						
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1.1				84	City			85 Zip	Code	
Section Comment Comm		To the provisions of Sections 607.05	02 and 607.1508 Florida Statu	ites, the abov	e-named cor	poration submits this statement for the p	ourpose of	thanging i	ts registered	
12	office or agent 13	registioned agreed on both on the States for story water and according the oblin	le of Fiorida. Such change was cations of Section 607,0505. F	authorized by lorida Statute	the corpora	ition's board of directors. Fhereby acce	ot the appo	intment as	registered	
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PD	54. 8481 089	Topic Washington September	7 The of the diapple of a (NC)	TE Reguleted Ag	ent signature requ	rred when reinstating)	DAYE			
MARKED JACKSON, RITA 12 NAME 13 STREEL ADDRESS	12.	· · · · · · · · · · · · · · · · · · ·	The second secon	13.		ADDITIONS/CHANGES TO OFFI				
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FERNANDINA BEACH FL	MSM:			1.2 NAME						
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	fillet Maker.			6.3 STREE	ADDRESS					
6.4 CHY-SL-7IP	G11-8 26			6.4 CITY - 5	ST - 70P					

14. Lot be easy curt by 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 and called on the area and report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I are 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RITATAGION

3/21/97

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