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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G47260 (6)

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREE1 ADDRESS

CITY-ST-ZIP

FILED	
Apr 13 1998 8	:00am
Secretary of	State

US  3. Date Incorporated or Qualified 07/05/1988  2. Principal Place of Rusinoss 2. A Mailing Address 3. A FEI Number 59/234 1235 59/234 1	Principal Place of Business 7700 NO KENDALL DR STE 506	Mailing Address NATUARL BRANDS, INC. P.O. BOX 181386			
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Site	MIAMI FL 33156 US	DALLAS TX 75218 US		3. Date Incorporated or Qualified	S SPACE
Suite, Apt. #, etc.    Suite, Apt. #, etc.		<del></del> -1			- ' <del>-'</del>
City & State    City & State   City	Suite, Apt. #, etc.	<del></del>		5. Certificate of Status Desired	
Country   Zap   26   29   30   Country   Registered Agent   Personal Property Tax due united 30.   We have   No   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   HARRIS, THOMAS L   9300 8. DADELAND BLVD   9308   NAME   28   Street Address (P.O. By Number) is Not Agoptable   Name   N	City & State	<u>⊢</u> ₁ ′			T
HARRIS, THOMAS L 9300 S. DADELAND BLVD 9308 MIAMI FL 33156  83  84 City Unlands FL 85 Zip Code 17  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent. I are familiar with and accept the obligations of Section 607 0505, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent. I are familiar with and accept the obligations of, Section 607 0505, Florida Statutos  SIGNATURE  SIGNATURE  PDT	<b>Zip</b> Country <b>25</b>	29 30	- '	Personal Property Tax due June 30.	v Yes □ No
### STREET ADDRESS  ### STILL COLORS NOT ACCOUNT OR A COLORS NOT A COLORS NOT ACCOUNT OR A COLORS NOT A COLORS NOT ACCOUNT OR A COLOR NOT ACCOUNT OR ACCOUNT O				d Agent	
TILE PDT OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE PDT OFFICERS AND DIRECTORS 11.1 ITILE STREET ADDRESS CITY-S1-ZIP DUCHESNEAU, DONALD A STREET ADDRESS CITY-S1-ZIP ORLANDO FL DUCHESNEAU, DONALD A STREET ADDRESS CITY-S1-ZIP ORLANDO FL DUCHESNEAU, DONALD A STREET ADDRESS CITY-S1-ZIP ORLANDO FL DELETE 3.1 TILE NAME STREET ADDRESS ORLANDO FL 3.2 NAME STREET ADDRESS CITY-S1-ZIP ORLANDO FL 3.3 STREET ADDRESS ORLANDO	9300 S. DADELAND BLVD  82 Street Address (P.O. Box Number, is Not Acceptable)  8308				
SIGNATURE    Signature   Signa	44 Discount to the available of Continue COT DU	00 and CO7 1509 Florida Platition	1 7 7	rlande F	L 85 Zip Code 3 2 8 19
Signature. Spread of pertilest number of regolitherest numbers of regolitherest num	office or registered agent, or both, in the State agent. I am familiar with and accept the oblig	of Florida. Such change was ault ations of, Section 607.0505, Florid	norized by the corpora a Statutes.	ation's board of directors. I hereby accept the ap	ppointment as registered
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THLE  PDT  NAME  MCLAUGHLIN, DOROTHY A  STREET ADDRESS  CITY-ST-2IP  TITLE  NAME  DUCHESNEM, DONALD A  STREET ADDRESS  STREET ADDRESS  B511 Cedau Cove Court  ORLANDO FL  14.CITY-ST-2IP  DUCHESNEM, DONALD A  STREET ADDRESS  B511 Cedau Cove Court  ORLANDO FL  15. STREET ADDRESS  23.STREET ADDRESS  24.CITY-ST-2IP  TITLE  NAME  DUCHESNEAU, DONALD A  32.STREET ADDRESS  CITY-ST-2IP  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE  DUCHESNEAU, DONALD A  32.STREET ADDRESS  CITY-ST-2IP  TITLE  DUCHESNEAU, DONALD A  32.NAME  33.STREET ADDRESS  CITY-ST-2IP  TITLE  DELETE  Addition  Addition  Change  Addition  Addition  Addition  Change  Addition  Addition	SIGNATURE Separation benedity to the basis of treatment and	to Land to it application (NOTE for	noistered Agent signature requ	ired when reinstating) DATE	148
NAME STREET ADDRESS CITY-ST-ZIP NAME NAME DUCHESNEM, DONALD A STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME DUCHESNEAU, DONALD A STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADD					ND DIRECTORS IN 12
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STREET ADDRESS				· · ·	
CITY-ST-7IP	CITY-ST-ZIP		4.4 CHY-S1-ZIP	•	

CITY-ST-ZIP 14. Hereby cortify 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an atlachment with an address.

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

DELETE

W12190

Change

Change

Addition

Addition