

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L98010**

1. Corporation Name

Better Nutrition Inc.

Principal Place of Business

3301 Johnson St.
Hollywood, FL 33021

Mailing Address

4629 Poinciana St
Apt 101
Lauderdale By The Sea, FL
33308

FILED

99 SEP 13 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3301 Johnson St.
Suite, Apt. #, etc.

2a. Mailing Address

26 4629 Poinciana St.
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

8/10/90

4. FEI Number

650240222

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

22 City & State

23 Hollywood FL

24 Zip

33021

25 Country

USA

27 City & State

28 Lauderdale By The Sea, FL

29 Zip

33308

30 Country

Broward

9. Name and Address of Current Registered Agent

Jennifer Collins CARON FEIN
4629 Poinciana St 4650 SW 61st Ave
Apt 101 Ft. Lauderdale, FL
Lauderdale By The Sea, FL 33314

10. Name and Address of New Registered Agent

81 Name

JENNIFER COLLINS

82 Street Address (P.O. Box Number is Not Acceptable)

83 4629 Poinciana St, Apt 101

84 City

Lauderdale By The Sea

85 Zip Code

FL 33308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE JENNIFER COLLINS

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

8/13/99

DATE

12. OFFICERS AND DIRECTORS

TITLE Director/President/ST
NAME CARON FEIN
STREET ADDRESS 4650 SW 61st Ave
CITY-ST-ZIP Ft. Lauderdale, FL 33314

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P/S/T
1.2 NAME JENNIFER COLLINS
1.3 STREET ADDRESS 4629 Poinciana St, Apt 101
1.4 CITY-ST-ZIP Lauderdale By The Sea, FL 33308

☐ Change

☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I hereby certify 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 attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER COLLINS JENNIFER COLLINS

7/27/99

954-492-8745

Date

Daytime Phone #

CR2E034 (1/98)