SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Aug 16, 1999 8:00 am Secretary of State

08-16-1999 90003 020 ***550.00

305 871-2484

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000082233

E. & L. NUTRITION, INC.

Principal Place	e of Business	Mailit	ng Address				1 125115 SI 1510 1511 SI 1511 SI 15111 SI	uu be i#) 1 9)(8)	- 117 7 	
6596 N.W. 36TH ST.			6595 N.W. 36TH ST.								
SUITE 311		SUITE	SUITE 311				DO NOT WEITE IN THE ODAGE				
MIAMI FL 33166	5	MIAM	MIAMI FL 33166			ļ.	DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified 11/09/1994				1
2. Principal P	lace of Business	2a. M	lailing Address				4. FEI Number		A	pplied For	
21		26					65-0532896			ot Applicable	
Suite, Apt.	#, etc.	S	Suite, Apt. #, etc.			دا ند	-5Certificate of Status Desired			Additional	-
22		27								equired	1
City & Stat	le	} -	ity & State				6. Election Campaign Financing			May Be	
23		28		Causa	4		Trust Fund Contribution	<u> </u>	Added	to Fees	
Zip	Country	Zi	ıþ	Countr			8. This corporation owes the current year Intangible Personal Property. Yes No			No.	ĺ
24	9. Name and Address of Currer	29	red Agent	30			10. Name and Address of New Reg				
	9. Name and Address of Conten	it izediatei	eu Agent		81 Nar						1
GAR	CIA, ERNESTO										
	SW 98 COURT				82 Stre	et Address	(P.O. Box Number is Not Acceptable)			ĺ
l	AI FL 33165			ŀ	83						
					84 City	,		FL	35 Zip	Code	
office or	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida.	. Such change was a	uthorized	by the c	d corporation's	on submits this statement for the purpos s board of directors. I hereby accept the	ose of change ne appointm	jing its re ent as re	egistered egistered	
GIGNATORE	Signature, typed or printed name of registered age	nt and title if ap	plicable. (NO	TE: Registere	d Agent sig	nature required	when reinstating)	DATE			ĺá
12.	OFFICERS AN	ND DIRECT	ORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND I	DIRECT	ORS IN 12	5
TITLE	P		L DELETE	1.1 TITL	.E			1 1	Change	Addition	=
NAME	GARCIA, ERNESTO			1.2 NAN	AE .	Į.			onango		2
STREET ADDRESS	2261 SW 98 COURT			1.2 NAN		į.			onango		15
CITY-ST-ZIP					EET AODRE	ss			bilango		1
	MIAMI FL 33165			1.3 \$TR 1.4 CIT	EET ADDRE Y-ST-ZIP	ss		·			7000
TITLE	V		DELETE	1.3 STR	EET ADDRE Y-ST-ZIP	ss			Change	Addition	
	V GARCIA, LEONARDO		DELETE	1.3 \$TR 1.4 CIT	EET ADDRE Y-ST-ZIP .E	SS	<u>. </u>			Addition	000
TITLE	V GARCIA, LEONARDO 700 NW 106 AVE #3			1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM	EET ADDRE Y-ST-ZIP .E					Addition	73000
TITLE NAME	V GARCIA, LEONARDO		DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT	EET ADDRE Y-ST-ZIP .E AE EET ADDRE Y-ST-ZIP						7300
TITLE NAME STREET ADDRESS	V GARCIA, LEONARDO 700 NW 106 AVE #3			1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITL	EET ADDRE Y-ST-ZIP I.E AE EET ADDRE Y-ST-ZIP					Addition Addition	0000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, LEONARDO 700 NW 106 AVE #3			1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT	EET ADDRE Y-ST-ZIP I.E AE EET ADDRE Y-ST-ZIP				Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	V GARCIA, LEONARDO 700 NW 106 AVE #3			1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAA	EET ADDRE Y-ST-ZIP I.E AE EET ADDRE Y-ST-ZIP	SS -			Change		2000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, LEONARDO 700 NW 106 AVE #3			1.3 STR 1.4 GIT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIT	EET ADDRE Y-ST-ZIP E AE EET ADDRE Y-ST-ZIP E AE EET ADDRE Y-ST-ZIP AE EET ADDRE	SS -			Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	V GARCIA, LEONARDO 700 NW 106 AVE #3			1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL	EET ADDRE Y-ST-ZIP E AE EET ADDRE Y-ST-ZIP E AE EET ADDRE Y-ST-ZIP AE EET ADDRE Y-ST-ZIP	SS -			Change		שנפט
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, LEONARDO 700 NW 106 AVE #3		☐ DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAM	EET ADDRE Y-ST-ZIP EET ADDRE Y-ST-ZIP EET ADDRE Y-ST-ZIP EET ADDRE Y-ST-ZIP EET ADDRE	ss .			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	V GARCIA, LEONARDO 700 NW 106 AVE #3		☐ DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAN 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAN 4.3 STR	EET ADDRE Y-ST-ZIP AE EET ADORE Y-ST-ZIP EET ADDRE Y-ST-ZIP EET ADDRE Y-ST-ZIP EAE EET ADDRE	ss .			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, LEONARDO 700 NW 106 AVE #3		DELETE DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAN 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAN 4.3 STR 4.4 CIT	EET ADDRE Y-ST-ZIP AE EET ADDRE Y-ST-ZIP LE AE EET ADDRE Y-ST-ZIP LE AE EET ADDRE H AE EET ADDRE	ss .			Change Change	Addition Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	V GARCIA, LEONARDO 700 NW 106 AVE #3		DELETE DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM	EET ADDRE Y-ST-ZIP .E AE EET ADDRE Y-ST-ZIP .E AE EET ADDRE Y-ST-ZIP .E AE EET ADDRE (-ST-ZIP .E AE	SS -	-		Change Change	Addition Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARCIA, LEONARDO 700 NW 106 AVE #3		DELETE DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STR 5.4 CIT	EET ADDRE Y-ST-ZIP AE EET ADDRE Y-ST-ZIP E EET ADDRE Y-ST-ZIP AE EET ADDRE Y-ST-ZIP AE EET ADDRE Y-ST-ZIP AE EET ADDRE Y-ST-ZIP AE	SS -			Change Change Change	Addition Addition Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	V GARCIA, LEONARDO 700 NW 106 AVE #3		DELETE DELETE	1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAA 5.3 STR 5.4 CIT 6.1 TITL 6.2 NAA	EET ADDRE Y-ST-ZIP EET ADDRE	SS SS			Change Change Change	Addition Addition Addition	

6.4 CITY-ST-ZIP

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 1 am an officer or director of the corporation or the receiver or trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on on an attachment with an address.

SIGNATURE:

SIGNATURE:

B. C. C. A. 8/10/99 305 871-29

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #