

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000043406

FILED
Dec 09, 2004
Secretary of State**Entity Name:** AMERICAN NUTRITIONAL EXCHANGE, INC.**Current Principal Place of Business:**12260 SW 53RD ST
STE 6003
COOPER CITY, FL 33330**New Principal Place of Business:**12260 SW 53RD ST
STE 603
COOPER CITY, FL 33330 US**Current Mailing Address:**9990 S.W. 77TH AVENUE
SUITE 330
MIAMI, FL 331562699**New Mailing Address:**9990 S.W. 77TH AVENUE
SUITE 330
MIAMI, FL 331562699 US**FEI Number:** 65-0839459**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MARGOLIS, JOHN A ESQ.
9990 S.W. 77TH AVENUE
SUITE 330
MIAMI, FL 331562699 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

OFFICERS AND DIRECTORS:**Title:** D (X) Delete
Name: GONZALEZ, ISMAEL
Address: 12260 SW 53RD ST STE 603
City-St-Zip: COOPER CITY, FL 33330**Title:** DVPT () Delete
Name: MONTELLESE, DONALD
Address: 12260 SW 53RD ST STE 603
City-St-Zip: COOPER CITY, FL 33330**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DVPT (X) Change () Addition
Name: MONTELLESE, DONALD
Address: 12260 SW 53RD ST STE 603
City-St-Zip: COOPER CITY, FL 33330 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD MONTELLESE

DVPT

12/09/2004

Electronic Signature of Signing Officer or Director

Date