

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000043406

FILED  
Jan 20, 2005  
Secretary of State

Entity Name: AMERICAN NUTRITIONAL EXCHANGE, INC.

## Current Principal Place of Business:

12260 SW 53RD ST  
STE 603  
COOPER CITY, FL 33330 US

## New Principal Place of Business:

## Current Mailing Address:

9990 S.W. 77TH AVENUE  
SUITE 330  
MIAMI, FL 331562699 US

## New Mailing Address:

FEI Number: 65-0839459      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DVPT ( ) Delete  
Name: MONTELLESE, DONALD  
Address: 12260 SW 53RD ST STE 603  
City-St-Zip: COOPER CITY, FL 33330 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DP ( ) Change (X) Addition  
Name: GONZALEZ, ISMAEL  
Address: 12260 SW 53RD ST  
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: ISMAEL GONZALEZ

DP

01/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date