

561-640-8380 SOMMER EVER KOHLE

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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 # P98000077986 1. Corporation Name MEDICAL NUTRITION CONSULTANTS, INC.			
Principal Place of Business 300 BUTLER STREET WEST PALM BEACH FL 33407		Mailing Address 300 BUTLER STREET WEST PALM BEACH FL 33407	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip Country		2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip Country	
3. Date Incorporated or Quelled 09/08/1988		4. FEI Number 65-0865739	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee	
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No		8. Name and Address of Current Registered Agent HOWICK, MARK H 14155 U.S. HIGHWAY ONE SUITE 302 JUNO BEACH FL 33408	
9. Name and Address of New Registered Agent 91. Name 92. Street Address (P.O. Box Number is Not Acceptable) 93. City FL 94 Zip Code		10. Name and Address of New Registered Agent 101. Name 102. Street Address (P.O. Box Number is Not Acceptable) 103. City FL 104 Zip Code	
11. Pursuant to the provisions of Sections 607.0602 and 607.1505, 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  1/6/99			
OFFICERS AND DIRECTORS			
12. DP ☐ DELETE MEREY, DAISY 200 BUTLER STREET WEST PALM BEACH FL 33407			
13. ☐ DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
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