PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P98000089432

## Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90050 031 \*\*\*150.00

X I TIENSE	NUTRITION OF PALM BEA	CH, INC.					
Principal Place of Business Mailing Address							
1177 ROYAL PALM BEACH BLVD. 1177 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 10/19/1998		
	, , , , , , , , , , , , , , , , , , ,	D. Mailing Addesses			4. FELNumber	TAn	plied For
2. Principal Place of Business 2a. Malling Address 2b. Malling Address 2c. Malling Add						ot Applicable	
21 Sulte, Apt.	# etc .	Suite, Apt. #, etc.			037-44-12	" NX /5 /	
22	w, <del>c</del>	27			5. Certificate of Status Desired	Fee Re	
* City & Stat	<u> </u>	City & State	حت حدا		-6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	
Zip	Country	Zip	Count	try	8. This corporation owes the cum	ent year Intangible	
24	25	29	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent	$\Box$		10, Name and Address of New R	egistered Agent	
			}8	Name			)
HEROUX, DANIEL P		82 Street Add		dress (P.O. Box Number is Not Accepta	ble)		
	ROYAL PALM BEACH BLVD.	** -	[			<u> </u>	
ROY	AL PALM BEACH FL 33411		[8	13		• •	
	• .		\[\frac{1}{6}\]	4 City	,	85 Zip C	Code
		Seed 607 1500 Finding Statute	the obe	· · · · · · · · · · · · · · · · · · ·	envention automite this statement for the	ourness of changing its	registered
office or t	egistered agent, or both, in the State o	of Florida. Such change was a	thorized b	y the corpora	tion's board of directors. I hereby accep	the appointment as re-	gistered
agent, i a			ida Statuti	85.	rporation submits this statement for the tilon's board of directors. I heraby accep	110 199	
agent. I a SIGNATURE	and seve	$\sim$			·	4/19/99	
SIGNATURE	Signature, typed or printed name of registered agent	end tale shapplicable. (NOTE:	Registered Ac		ired when reinstaling)	DAT   19   9 9	
	and seve	end tale shapplicable. (NOTE:		gent signature requi	·	DAT   19   9 9	
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agent OFFICERS AND	and the Applicable. (NOTE:	Registered Ac	gent algnature requi	ired when reinstaling)	DAT PICERS AND DIRECTO	DRS IN 12
SIGNATURE  12. TITLE NAME.	Signature, typed or printed name of registered agent OFFICERS AND D HEROUX, DANIEL P	end tale Augustation. (NOTE: D DIRECTORS	13. 1.1 TITLE	gent algnature requi	ired when reinstaling)	DAT PICERS AND DIRECTO	DRS IN 12
SIGNATURE  12. TITLE  NAME . STREET ADDRESS	Bigneline, typed or printed name of recisioned agent OFFICERS AND D HEROUX, DANIEL P 1177 ROYAL PALM BEACH BLV	ord tale Mapplicable. (NOTE: D DIRECTORS DELETE	13. 1.1 TITLE	ent signature requi	ired when reinstaling)	DAT PICERS AND DIRECTO	DRS IN 12 ☐ Addition
SIGNATURE  12. TITLE NAME.	Signature, typed or printed name of registered agent OFFICERS AND D HEROUX, DANIEL P	ord tale Mapplicable. (NOTE: D DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET	E ETADORESS	ired when reinstaling)	DAT PICERS AND DIRECTO	DRS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bigneline, typed or printed name of recisioned agent OFFICERS AND D HEROUX, DANIEL P 1177 ROYAL PALM BEACH BLV	ord tale Mapplicable. (NOTE: D DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAM 1.3 STRE 1.4 CITY	ent algreture requi	ired when reinstaling)	DATY  DATY  ICERS AND DIRECTO  Change	DRS IN 12 ☐ Addition
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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 ampowered.

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