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FILED

Feb 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V09461

(7)

1. Corporation Name

SPECIAL NUTRIENTS, INC.

Principal Place of Business

881 BELLE MEADE ISLAND
MIAMI FL 33138

Mailing Address

881 BELLE MEADE ISLAND
MIAMI FL 33138

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1992

4. FEI Number

65-0310611

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

21 1394 Coral Way

Suite, Apt. #, etc

22

City & State

23 Miami FL

Zip

24 33145

Country

25 U.S.A.

2a. Mailing Address

26 1394 Coral Way

Suite, Apt. #, etc

27

City & State

28 Miami FL

Zip

29 33145

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

TAMAMES, SYLVIA
881 BELLE MEADE ISLAND
SUITE 610-N
MIAMI FL 33138

10. Name and Address of New Registered Agent

81 Name

TAMAMES, SYLVIA

82 Street Address (P.O. Box Number is Not Acceptable)

1394 Coral Way

83

84

City

Miami

FL

85

Zip Code

33145

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Sylvia TAMAMES, President.

2/9/1998

Signature, typed or printed name of registered agent and title acceptable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D
TAMAMES, SYLVIA
881 BELLE MEADE ISLAND
MIAMI FL

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

STD
TAMAMES, FERNANDO, II
881 BELLE MEADE ISLAND
MIAMI FL

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D
TAMAMES, FERNANDO, III
881 BELLE MEADE ISLAND
MIAMI FL

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change Addition

Change Addition

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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 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.

SIGNATURE

FERNANDO TAMAMES
SECRETARY

2/9/1998

CR2E034 (1097)