## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

**PROFIT CORPORATION ANNUAL REPORT** 

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000003577 (3)

MANNATECH INCORPORATED

**FILED** May 08 1998 8:00am Secretary of State



600 \$ ROYAL LN STE 200 COPPELL TX 75019 US			600 S ROYAL LN STE 200 COPPELL TX 75019 US				3	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/08/1994			
2. Principal Place of Business			2a Mailinn Address	3e Mailing Address				07/00/1994 4. FEI Number		11.	
	ace of Busin	ess	2a. Mailing Address	<del>-</del>			4	75-2508900		<del>- +</del>	pplied For
21			26					73-2306900	<del></del>	<del></del>	lot Applicable
Suite, Apt. (			Suite, Apt. #, etc.			5	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State	City & State			6	6. Election Campaign Financing	_	\$5.00	May Be
23			28				Trust Fund Contribution		Addec	to Fees	
Zip		Country	Zip Country			8	8. This corporation owes or has p				
24		25	29	30	L			Personal Property Tax due Jur			No No
		and Address of Currer					10	0. Name and Address of New F	legistered	Agent	
		e-Hall Corporatio	ON SYSTEM, INC.		81	Name					
120	1 Hays S			82 Street Ad			ddress (	(P.O. Box Number is Not Accept	able)		
SUI	TE 105			Street Ad				,			
TAL	L <b>Á</b> HASSEE	FL 32301	•		83						
					84	City			FL	<b>85</b> Zip	Code
-,,	4.		0 1 007 1500 51 11 51		لبا					•	ita "an adet t
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	Signature typed	or printed name of registered ago	ent and title if annicable (NO	II : Baaistara	1 Ann	nt signature r	neouited whe	nen reinstating)	DATE		<del></del>
12,	aignatore, typeci	OFFICERS AN		13.		int Bigriatore in	rectaned whe	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
TITLE	PD	DITIOCHE/III	DELETE	1.1 Ti	TLF		w -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAME	CASTER	, SAMUEL L		1.2 N							
		BBLESTONE CT.			1.3 STREET ADDRESS						
STREET ADDRESS		HILL TX 76104									
CITY-ST-ZIP	S	THEE IX TOTAL	DELETE	1.4 CI		1- ZIP	····	····		Change	Addition
TITLE	-	PATRICK D.	□ זינננונ	2.1 1		1				T Cliarific	L. Municoli
NAME	•	IADYWOOD LN		2.2 N/							
STREET ADDRESS				2.3 \$1	REET	ADDRESS					
CITY-ST-ZIP		VILLE TX				ST-ZIP		· · · · · · · · · · · · · · · · · · ·		T=1	
TITLE	D	T AIAD	L_ DELETE	3.1 (0	TLE	- 1				Change	☐ Addition
NAME	FIORETT			3.2 N/	ME						
STREET ADDRESS		ACON CREST DR		3.3 \$1	REET	ADDRESS					
CITY-ST-ZIP	PLANO '	IX				ST-ZIP					
TITLE	70		DELETE	4.1 T)	TLE					Change	Addition
NAME		7, WILLIAM C	•	4. 2 NAME							
STREET ADDRESS		EEKWOOD		4.3 \$1	REE1	ADDRESS					
CITY-ST-ZIP	GRAPEV	INE TX 76051		4.4 Ci	<u>TY</u> - S	T- 21P					
TITLE			☐ DELETE	5.1 TI	TLE					Change	Addition
NAME				5.2 N	ME						
STREET ADDRESS				5.3 \$1	REET	ADDRESS					
CITY-ST-ZIP				5.4 CI	TY-S	T-21P					
TITLE	<u></u> ,		DELETE	6.1 TE	_					Change	Addition
NAME				6.2 NA	ME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP				6.4 CI							,
14. I hereby c	ertify that the	e information supplied w	ith this filing does not qualify	for the exe	ame	tion stated	d in Sect	tion 119.07(3)(i), Florida Statutes	I further co	ertify that th	e information
indicated of	on this annu Jirector of th	al report or supplementa e corporation or the rec	al annual report is true and ác	curate and	d tha	at my sign	nature sh	hall have the same legal effect as if by Chapter 607, Florida Statutes	if made ur	nder oath; tl	hat I am an