

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099961

FILED
Mar 20, 2008
Secretary of State

Entity Name: BIOWARE INC.

Current Principal Place of Business:

712 MONET ST.
LEHIGH ACRES, FL 33936

New Principal Place of Business:

17498 OLD HARMONY DRIVE
SUITE 201
FORT MYERS, FL 33908

Current Mailing Address:

712 MONET ST.
LEHIGH ACRES, FL 33936

New Mailing Address:

17498 OLD HARMONY DRIVE
SUITE 201
FORT MYERS, FL 33908

FEI Number: 20-0735941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EZEQUIEL, MARRERO
712 MONET ST.
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

EZEQUIEL, MARRERO
17498 OLD HARMONY DRIVE
SUITE 201
FORT MYERS, FL 33908 US

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: EZEQUIEL MARRERO

03/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EZEQUIEL, MARRERO
Address: 712 MONET ST.
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EZEQUIEL, MARRERO
Address: 17498 OLD HARMONY DRIVE, SUITE 201
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EZEQUIEL MARRERO

P

03/20/2008

Electronic Signature of Signing Officer or Director

Date