

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

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DOCUMENT # **P25366 (6)**

1. Corporation Name  
**BIO-RAD LABORATORIES, INC.**



Principal Place of Business: **1000 ALFRED NOBEL DRIVE HERCULES CA 94547**  
Mailing Address: **1000 ALFRED NOBEL DRIVE HERCULES CA 94547**

2. Principal Place of Business: **21** State, Apt. #, etc. **22** City & State **23** Zip **24** Country **25**  
2a. Mailing Address: **26** State, Apt. #, etc. **27** City & State **28** Zip **29** Country **30**

3. Date Incorporated or Organized: **07/20/1989** 3a. Date of Last Report: **04/11/1995**  
4. FEI Number: **94-1381833** 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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent  
**81** Name  
**82** Street Address (P.O. Box Number is Not Acceptable)  
**83**  
**84** City **FL** **85** Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 607.0503, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>SCHWARTZ, DAVID</b>	
STREET ADDRESS	<b>1000 ALFRED NOBEL DRIVE HERCULES CA</b>	
CITY-STATE-ZIP		
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>BENNETT, JAMES</b>	
STREET ADDRESS	<b>1000 ALFRED NOBEL DRIVE HERCULES CA</b>	
CITY-STATE-ZIP		
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>HILLMAN, ALBERT</b>	
STREET ADDRESS	<b>1000 ALFRED NOBEL DRIVE HERCULES CA</b>	
CITY-STATE-ZIP		
TITLE	<b>GCS</b>	<input type="checkbox"/> DELETE
NAME	<b>WADLER, SANFORD</b>	
STREET ADDRESS	<b>1000 ALFRED NOBEL DRIVE HERCULES CA</b>	
CITY-STATE-ZIP		
TITLE	<b>VDD</b>	<input type="checkbox"/> DELETE
NAME	<b>ZABIN, BURTON A.</b>	
STREET ADDRESS	<b>1000 ALFRED NOBEL DRIVE HERCULES CA</b>	
CITY-STATE-ZIP		
TITLE	<b>VPD</b>	<input type="checkbox"/> DELETE
NAME	<b>SCHWARTZ, NORMAN</b>	
STREET ADDRESS	<b>1000 ALFRED NOBEL DRIVE HERCULES CA</b>	
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>P/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-STATE-ZIP		
21 TITLE	<b>V/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-STATE-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-STATE-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 199.07(3)(a), 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 registrar or trustee or guardian or executor or administrator or agent as provided for in Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an additional sheet with an address.

SIGNATURE: *Sanford Wadler* **SANFORD WADLER**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/2/96* (510) 724-7000  
Division of Corporations

CR2E034 (12/95)

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BIO-RAD LABORATORIES, INC.  
SCHEDULE OF OFFICERS

OFFICER	ADDRESS
President, David Schwartz	1000 Alfred Nobel Dr. Hercules, CA 94547
Vice President, James J. Bennett	1000 Alfred Nobel Dr. Hercules, CA 94547
Vice President, Thomas L. Braje	1000 Alfred Nobel Dr. Hercules, CA 94547
Vice President, Norman Schwartz	1000 Alfred Nobel Dr. Hercules, CA 94547
Vice President, Burton A. Zabin	1000 Alfred Nobel Dr. Hercules, CA 94547
General Counsel and Secretary, Sanford Wadler	1000 Alfred Nobel Dr. Hercules, CA 94547

SCHEDULE OF DIRECTORS

James J. Bennett	1000 Alfred Nobel Dr. Hercules, CA 94547
Albert Hillman	1000 Alfred Nobel Dr. Hercules, CA 94547
Philip Padou	1000 Alfred Nobel Dr. Hercules, CA 94547
Alice Schwartz	1000 Alfred Nobel Dr. Hercules, CA 94547
David Schwartz	1000 Alfred Nobel Dr. Hercules, CA 94547
Burton A. Zabin	1000 Alfred Nobel Dr. Hercules, CA 94547
Norman Schwartz	1000 Alfred Nobel Dr. Hercules, CA 94547