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May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P93000002144 (2)

11/01/97 NC

1. Corporation Name
~~THE SELVIG CORPORATION~~ Green Leaf Bio Tech, Inc.



Principal Place of Business
2100 CORPORATE SQUARE BLVD.
SUITE 201
JACKSONVILLE FL 32218

Mailing Address
2100 CORPORATE SQUARE BLVD.
SUITE 201
JACKSONVILLE FL 32218-1920

3. Date Incorporated or Qualified 01/08/1993
3a. Date of Last Report 04/26/1996
4. FEI Number 50-3164950
5. Certificate of Status Desired [] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [] \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [] Yes [] No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
KLICKER, KENNETH L
1301 RIVERPLACE BLVD.
SUITE 2340
JACKSONVILLE FL 32207

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 607.1508, 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
D KLICKER, KENNETH L
1301 RIVERPLACE BLVD, SUITE 2340
JACKSONVILLE FL 32207
D SHIRCLIFF, ROBERT T
1301 RIVERPLACE BLVD, SUITE 2520
JACKSONVILLE FL 32207
D HICKEY, THOMAS P
210 CORPORATE SQUARE BLVD, SUITE 201
JACKSONVILLE FL 32218
D OTTENSTROER, DUANE L
1301 RIVERPLACE BLVD, SUITE 2340
JACKSONVILLE FL 32207
D POWERS, WARREN P
1301 RIVERPLACE BLVD, SUITE 1904
JACKSONVILLE FL 32207

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE [] Change [] Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
S Kllicker, Kenneth L.
SAME
SAME
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
200002181212
-05/16/97--01046--008
***165.00
3.1 TITLE [] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
D, P Hickey, Thomas P.
2100 Corporate Square Blvd Suite 201
Jacksonville, FL 32218
4.1 TITLE [] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Whitman, Paul S.
2100 Corporate Square Blvd Suite 201
Jacksonville, FL 32218
5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
William A Myzard
2100 Corporate Square Blvd, Suite 201
Jacksonville FL 32218
6.1 TITLE [] Change [] Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Selvig, Thomas A
2100 Corporate Square Blvd Suite 201
Jacksonville FL 32218

14. I do 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. 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: _____ V.P. - Finnard 4/25/97 904-723-0002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/96)