

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

**FILED**

**May 06 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 # P93000002144 (2)**  
 1. Corporation Name  
**GREEN RELEAF BIOTECH, INC.**



Principal Place of Business: **2100 CORPORATE SQUARE BLVD., STE. 201 JACKSONVILLE FL 32216**  
 Mailing Address: **2100 CORPORATE SQUARE BLVD., STE. 201 JACKSONVILLE FL 32216**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/08/1993**

4. FEI Number: **59-3164950** 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 (21-23) and Mailing Address (2a-28) fields with sub-fields for Suite, Apt. #, etc., City & State, Zip, and Country.

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 (81-85)  
**81 Name: Dorsch, Gary E.**  
**82 Street Address: 2100 Corporate Square Blvd.**  
**83 Suite 201**  
**84 City: Jacksonville FL 85 Zip Code: 32216**

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]* DATE: **4/28/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1.1 TITLE	V. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KLICKER, KENNETH L	1.2 NAME	MYERS, William A.
STREET ADDRESS	1301 RIVERPLACE BLVD. SUITE 2340	1.3 STREET ADDRESS	2100 Corporate Square Blvd, Suite 201
CITY-ST-ZIP	JACKSONVILLE FL 32207	1.4 CITY-ST-ZIP	Jacksonville, FL 32216
TITLE	D	2.1 TITLE	V. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHIRCLIFF, ROBERT T	2.2 NAME	VARSHOVI, Amir A.
STREET ADDRESS	1301 RIVERPLACE BLVD., SUITE 2529	2.3 STREET ADDRESS	2100 Corporate Square Blvd Suite 201
CITY-ST-ZIP	JACKSONVILLE FL 32207	2.4 CITY-ST-ZIP	Jacksonville, FL 32216
TITLE	DP	3.1 TITLE	D.P. <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HICKEY, THOMAS P	3.2 NAME	Dorsch, Gary E.
STREET ADDRESS	2100 CORPORATE SQUARE BLVD., STE. 201	3.3 STREET ADDRESS	2100 Corporate Square Blvd Suite 201
CITY-ST-ZIP	JACKSONVILLE FL 32216	3.4 CITY-ST-ZIP	Jacksonville, FL 32216
TITLE	D	4.1 TITLE	D.C. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OTTENSTROER, DUANE L	4.2 NAME	OTTENSTROER, DUANE L.
STREET ADDRESS	1301 RIVERPLACE BLVD., SUITE 2340	4.3 STREET ADDRESS	Same - No Change
CITY-ST-ZIP	JACKSONVILLE FL 32207	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POWERS, WARREN P	5.2 NAME	
STREET ADDRESS	1301 RIVERPLACE BLVD., SUITE 1904	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	V.S. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITMAN, PAUL S	6.2 NAME	WHITMAN, Paul S.
STREET ADDRESS	2100 CORPORATE SQUARE BLVD., STE. 201	6.3 STREET ADDRESS	Same - No Change
CITY-ST-ZIP	JACKSONVILLE FL 32216	6.4 CITY-ST-ZIP	

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: *[Signature]*

CR22834 (10/97)