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

**PROFIT** CORPORATION ANNUAL REPORT

1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400000100 (5)

## BIOCHEM CORPORATION OF FLORIDA, INC.

Principal Place of Business Mailing Address 2898 UNIVERSITY DR P O ROX 9784 **CORAL SPRINGS FL 33065** CORAL SPRINGS FL 33075-9784 3. Date Incorporated or Qualified 3a. Date of Last Report 01/03/1994 04/04/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0456509 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes \text{ \text{X} fee } \text{ \text{ \text{No}} No Zip 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SALOMON, SCOTT C/O UDINE & UDINE, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 6208 WEST COMMERCIAL BLVD 83 FT LAUDERDALE FL 33319 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Signature, typed or protect name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE THE 1.1 TITLE Change \_\_ Addition PARKER, JEROME NAME 1.2 NAME 2898 UNIVERSITY DR. STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL** CITY-ST-ZIF 1.4 CITY - ST - ZIP DELETE 1071.6 21 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - 71P 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZII 3.4. CITY - \$1 - ZIP DELETE TITLE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CiTY-ST-ZiP DELETE TILLE 6.1 TITLE ☐ Change \_\_\_ Addition

6.2 NAME

**6.9 STREET ADDRESS** 6.4 CITY-ST-ZIP 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; 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 or an estachment with an address.

SIGNATURE: OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Feb 21 1997 8:00am

Secretary of State