

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27127

FILED  
Mar 23, 2008  
Secretary of State

Entity Name: FLORIDA BIOMEDICAL SOCIETY, INC.

## Current Principal Place of Business:

POB 43-0838  
MIAMI, FL 332430838 US

## New Principal Place of Business:

6340 SW 69TH AVENUE  
MIAMI, FL 33143 US

## Current Mailing Address:

POB 43-0838  
MIAMI, FL 332430838 US

## New Mailing Address:

POB43-0838  
S. MIAMI, FL 332430838

FEI Number: 59-2904766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KATCHIS, LOUIS  
6340 SW 69 AVE  
MIAMI, FL 33143 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: KATCHIS, LOUIS  
Address: 6340 SW 69 AVE  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: BOWLES, JAMES  
Address: 4519 AMBLEWOOD CT.  
City-St-Zip: PACE, FL 32571

Title: D ( ) Delete  
Name: MARTINEZ, ERNEST  
Address: 7032 REDONDO DRIVE  
City-St-Zip: PENSACOLA, FL 32526

Title: D ( ) Delete  
Name: CHONG, VICTOR W  
Address: 16140 SW 88 AVENUE  
City-St-Zip: MIAMI, FL 33157

Title: P ( ) Delete  
Name: RICHARDSON, JR  
Address: 1106 VINETREE DRIVE  
City-St-Zip: BRANDON, FL 33510

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: RICHARDSON, JR  
Address: 1106 VINETREE DRIVE  
City-St-Zip: BRANDON, FL 33510

Title: P ( ) Change (X) Addition  
Name: MCGUIRE, BRUCE  
Address: 8405 NW 29TH STREET  
City-St-Zip: MIAMI, FL 33122

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUIS KATCHIS, JR.

T

03/23/2008

Electronic Signature of Signing Officer or Director

Date