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. CORPORATION		FLORIDA DEPAR	ITMENT OF Smith	STATE	FI	LEO
ANNUAL REPORT		Secreta	ry of State		OC MAY TO	n #HIN: 58
1994 1996		DIVISION OF CORPOR			96 MAY 10 AM 10: 58	
Corporation Name		DOC	CUME	NT#	SECRETAF TALLAHAS	RY OF STATE SEE.FLORIDA
ESTRA CORP.		5014	64	(2)	MELANA	
lailing Address /O LW, MISHINN		cipal Place of Busines W. MISHKIN	is			
28 BRICKELL AVENUE		8900 SW 117TH AVE., SUITE B-104 MIAMI FL 33186-2110				
Alami FL 33133 US		MIAMI FL 33180-2110			DO NOT WR 3. Date Incorporated or Qualifier	ITE IN THIS SPACE d 3a. Date of Last Report
If above addresses are incorrect in	a anu way lina through inco	orrect information and s	enter correction	on below.	04/19/1976	07/30/1993
Mailing Address C/O BERN	ARD, 2s. (Principal Place of Bus	iness C/C	BERNARD	4. FEI Number 155	Applied For
YEAGER, SHERBURNE	4 PHSHCH4 26 1		URNE &	MISHKIN	Certificate of Status Desired	6. Election Campaign
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Ave.,	Ste. #31	\$8.75 Additional Fee Req	
City & State	(City & State			7. Nonprofit Exempt from \$138. Supplemental Fee	my words may be
Coral Gables, I		Coral Gab	les, l			Added to Fees or intangible tax under S. 199.032.
Zip Coun 33134 25 US	" <i>'</i>	33134	30 US		Florida Statutes 🔲	res No
9. Name and Add	ress of Current Registe		8	1 Name	10. Name and Address of Nev	w Registered Agent
LEIN, RONALD G.			L			4-61-5
DI NE 125TH STREET			6	21 Street Addres	ss (P.O. Box Number is Not Accep	nacie)
I. MIAMI FL 33161			8	3		
			8	4 City		85 Zip Code
44. Character to the councings of Sa	ctione 607 0502 and 607	1508 or Sections 61	3.0500 and	E17.1509 Florida	a Statutes, the above-named corpo	vation submits this statement
11. Pursuant to the provisions of Se for the purpose of changing its r I hereby accept the appointment			7.0502 and	617.1508, Florida		oration submits this statement
for the purpose of changing its r i hereby accept the appointment	egistered office or registe t as registered agent. I an	red agent, or both, in n familiar with, and ac	7.0502 and the State of cept the obl	617.1508, Florida	a Statutes, the above-named corpx ange was authorized by the corpo on 607.0505 or 617.0503, Florida DATE	oration submits this statement ration's board of directors.
for the purpose of changing its r I hereby accept the appointment SIGNATURE		red agent, or both, in a familiar with, and ac gent signature required when	7.0502 and the State of cept the obl	617.1508, Florida	on 607.0505 or 617.0503. Florida	oration submits this statement ration's board of directors.
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With an address.

SIGNATURE:

BIOHATURE AND TYPED OR PRINTED NAME OF BIOHAND OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF BIOHAND OFFICER OR DIRECTOR

David Devices Prove 4