

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 554641

(1)

1. Corporation Name

BIOSYSTEMS RESEARCH, INC.



Principal Place of Business

11550 SW 108TH CT
MIAMI FL 33176

Mailing Address

11550 SW 108TH CT
MIAMI FL 33176

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt., #, etc.

26

Suite, Apt., #, etc.

22

City & State

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City & State

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Zip

Country

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Zip

Country

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9. Name and Address of Current Registered Agent

SCHROEDER, PETER B.
11550 S.W. 108 CT.
MIAMI FL 33176

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

10/27/1977

3a. Date of Last Report

05/11/1995

4. FEI Number

59-1812371

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032

Florida Statutes

☐ Yes

☐ No

10. Name and Address of New Registered Agent

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 of Registered Agent

Signature of Agent for Change of Registered Office

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

PD
SCHROEDER, PETER B.
11550 SW 108TH CT
MIAMI FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

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