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

PROFIT CORPORATION ANNUAL REPORT

appears in Block 12 or Block

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 08 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 661187

(5)

INTERSTATE BLOOD BANK OF FLORIDA, INC.

Principal Place	ce of Business	Mailing Address	PT-07							
7790 NW 7TH (=	P O BOX 393 MEMPHIS TN 36101-0393 US	MEMPHIS TN 38101-0393							
						3. Date Incorporated or Qualified 03/13/1980	3a. Date o		eport .	
2. Principal P	³ace of Business	2a. Mailing Address		-		4. FEI Number			oplied For	
21		26	26			59-2014723				
Suite, Apt. (Suite, Apt. #, etc.	}			6. Certificate of Status Desired	sired See Required \$8.75 Additional			
City & State	le	City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees	
Ζip	Country	Zip	Coun	itry		8. This corporation has liability for				
24	25	29	30				Yes 🗌 N			
	9. Name and Address of Curr	rent Registered Agent				10. Name and Address of New Re	gistered Ager	nt		
	SENBERG, DONALD S.		*	81	Name					
	E S.E. THIRD AVE.		1	82	Street Add	dress (P.O. Box Number is Not Acceptate	ile)			
	O AMERIFIRST BLDG.		<u> </u>		<u></u>	·				
MIAI	MI FL 33131		*	83						
			1	84	City		FL 85	Zip	Code	
44 Darensut	to the premisions of Continue 607.1	ACAD and CO7 1509 Elegida Ctatu	tas the eb			poration submits this statement for the p		than it	* total	
office or re agent. Far signatures	registered agent, or both, in the Sta am familiar with, and accept the ob	tate of Florida. Such change was obligations of, Section 607.0505, Fl	authorized florida Statul	l by utes.	the corpora	ation's board of directors. I hereby accep	ot the appointe	nent as	registered	
	Signal or typed or printed name of registioned	d agent and title if applicable (NOT AND DIRECTORS		Ager	nt signature requ	vired when reinstating)	DATE	FATAL		
12.	SD OFFICERS A	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		ECTOR Change	Addition	
	RUBERT, JOE	La Deceie	1.1 7176				<u>.</u>	งแซเลิด	L.J Addition	
NAME STREET ADDRESS I	803 MT MORIAH		1.2 NAM		1222200					
	MEMPHIS, TN 00000				ADDRESS					
CHY+S1+ZIP Till(f	T	DELETE	1.4 CITY 2.1 TITLE		1- ZIP 1			Change	Addition	
NAME	MOSS, STEPHEN	hand wherever	2.7 III.		•	Mate Comput	-	Alian Pa	THE COURTON	
STREET ADORESS	150 JACKSON				ADDRESS /	Moss, Stephen 50 Jackson				
CITY \$1 ZIP	MEMPHIS, TN 00000		2 4 CIT		ADURESS I	MEMPHIS, TN.				
101.F	PD	☐ DELETE	31 TITLI	_	JI P ENF	100.11.01.01		Change	Addition	
NAMÉ	MOSS, LARRY	-	3.2 NAM					-		
STREET ADDRESS	150 JACKSON				ADDRESS					
CC Y-S1-7e2	MEMPHIS, TN 00000		34. C(T)		1					
Tith	CD	DELETE	41 TITL		17.11			Change	Addition	
NAME	MOSS, MORRIS		4 2 NAN	.ME				-	-	
STREET ADDRESS	803 MT MORIAH		4.3 STR	ŒĔŦ	ADDRESS					
00Y-S1-7P	MEMPHIS, TN 00000		4.4 CITY		i					
TILE	VO	☐ DELETE	51 TITLI					Change	Addition	
NAME	BERISH, ANDY		52 NAM	ИE						
\$18EET ADDRESS	150 JACKSON		5.3 STR	EET	ADDRESS					
CHY-ST 7P	MEMPHIS, TN 00000		5.4 CITY	Y-ST	T-ZIP					
1-11.1	A CONTRACTOR OF THE CONTRACTOR	☐ DELETE	61 TITLI					Change	Addition	
NAMI			62 NAM	ИE						
STREET ADDRESS			63 STR	EEY	ADDRESS					
CHY-S1-7-P			6.4 City							
14. I do hereb	by certify that the information support indicated on this annual report-	olied with this filing does not qual-	ify for the e	ogu	mption state	id in Section 119.07(3)(i), Florida Statute	s. I further cert	ify that	the	
Lam an of	fliper or director of the corporation	or the receiver or rustee empoy	wered to ex	(eci	ute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	tatules; and th	ial my r	name	