

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

FILED

OCT 16 AM 7:55

CLERK OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP,
ANNUAL REPORT
1999



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

1. Name of Limited Partnership

1a. DOCUMENT #
A96000001439

CBG BIOTECH, LTD.

99-AR
Cm



Mailing Address

~~P.O. BOX 33370
SOLON OH 44139~~

Principal Office Address

~~6371 PELICAN BAY BLVD., SUITE N-5
NAPLES FL 34108~~

3. Date Formed or Registered

08/01/1996

5a. Capital Contributions as
Shown on record.

\$1,000.00

3a. Date of Last Report

09/15/1997

5b. Amount of Capital
Contributions in FLORIDA
to date:

4. State or Country of Formation

FL

2. Mailing Address

7022 GREEN TREE DR.

2a. Principal Office Address

7022 GREEN TREE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34108

Country

USA

Zip

34108

Country

USA

6. FEI Number

65-0684802

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

BURKE, WILLIAM M ESQ.
C/O BOND, SCHOENECK & KING, P.A.
1167 THIRD STREET SOUTH, SUITE 107
NAPLES FL 33940

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

CBG BIOTECH INC.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

6371 PELICAN BAY BLVD
7022 GREEN TREE DRIVE

11b. City, State & Zip Code

NAPLES FL 34108

11c. Registration/
Document Number

P95000050031

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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

CBG Biotech, Inc., by
Gerald W. Camiener, Chairman

DATE

10/1/98

For CBG BIOTECH INC., GERALD W. CAMIENER

Daytime Telephone Number

941-514-1148

CR2E003 (8/98)