

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003694

FILED  
Jan 25, 2005  
Secretary of State

Entity Name: BIOLOK INTERNATIONAL INC.

## Current Principal Place of Business:

312 S MILITARY TRAIL  
DEERFIELD BEACH, FL 33442 US

## New Principal Place of Business:

368 S MILITARY TRAIL  
DEERFIELD BEACH, FL 33442 US

## Current Mailing Address:

312 S MILITARY TRAIL  
DEERFIELD BEACH, FL 33442 US

## New Mailing Address:

368 S MILITARY TRAIL  
DEERFIELD BEACH, FL 33442 US

FEI Number: 65-0317138

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KOZAK, INGO  
312 S MILITARY TRAIL  
DEERFIELD BEACH, FL 33442 US

## Name and Address of New Registered Agent:

KOZAK, INGO  
368 S MILITARY TRAIL  
DEERFIELD BEACH, FL 33442 US

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:

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCP ( ) Delete  
Name: HOLLANDER, BRUCE L  
Address: 10563 BOCA WOOD LANE  
City-St-Zip: BOCA RATON, FL

Title: DTVS ( ) Delete  
Name: KOZAK, INGO K  
Address: 4B ATRIUM CIR  
City-St-Zip: ATLANTIS, FL

Title: D ( ) Delete  
Name: SMITH, NEIL H  
Address: 7816 TRAVELERS TREE DR  
City-St-Zip: BOCA RATON, FL

Title: D ( ) Delete  
Name: WEISMAN, HAROLD  
Address: 11062 BOCA WOODS LANE  
City-St-Zip: BOCA RATON, FL 33428

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change ( ) Addition  
Name: HOLLANDER, BRUCE L  
Address: 10563 BOCA WOOD LANE  
City-St-Zip: BOCA RATON, FL 33428

Title: DTVS (X) Change ( ) Addition  
Name: KOZAK, INGO K  
Address: 457 PINE TREE COURT  
City-St-Zip: ATLANTIS, FL 33462

Title: D (X) Change ( ) Addition  
Name: SMITH, NEIL H  
Address: 7816 TRAVELERS TREE DR  
City-St-Zip: BOCA RATON, FL 33433

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: INGO K KOZAK

VP

01/25/2005

Electronic Signature of Signing Officer or Director

Date