FILED FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** Mar 14 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 F94000005728 (0) DOCUMENT # ORGANOCAT, INCORPORATED Mailing Address Principal Place of Business 605 VIA VERONA **805 VIA VERONA** DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442-8635 3. Date Incorporated or Qualified 3a. Date of Last Report 03/15/1996 11/04/1994 4. FEI Number Principal Place of Business 2a. Mailing Address Applied For 52-0915769 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation has fiability for intangible tax under s. 199.032 Zip Florida Statutes Yes 24 29 25 10, Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HETTINGER, WILLIAM P JR, PHD 605 VIA VERONA 82 Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33442** 83 84 Zip Code 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 objection 607.0505 Florida Statutes. red when re-estating) OFFICERS AND DIRECTOR ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change 11100 PTCD TITLE HETTINGER, WILLIAM P JR, PHD 1.2 NAME NAME **605 VIA VERONA** 1.3 STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 21 THLE TITLE **VSVC** HETTINGER, ALICE M 22 NAME NAME **605 VIA VERONA** STREET ADDRESS 2.3 STREET ADDRESS DEERFIELD BEACH FL 2 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 3 1 TITLE HETTINGER, SCOTT NAME **605 VIA VERONA** 3.3 STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL 3.4 CITY-S1-ZIP CITY-ST-ZIP DELFTE Change ___ Addition 4.1 TITLE TITLE inserra, diana l 4. 2 NAME STREET ADDRESS **605 VIA VERONA** 4.3 STREET ADDRESS DEERFIELD BEACH FL 4.4 C(1Y - S1 - 2)F CITY-ST-ZIP DELETE Change Addition. 5 1 TILLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - Z(F CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed or on an attachment with an address.

STREET ADDRESS CITY-ST-ZIP

6.3 STREET ADDRESS