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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

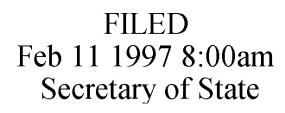
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9400006273 (6)

B. BRAUN MEDICAL, INC.





824 12TH AVE.  BETHLEHEM PA 18018  Mailing Address  824 12TH AVE.  BETHLEHEM PA 18018-3524	
3. Date Incorporated or 12/08/1994	r Qualified 3a. Date of Last Report 02/16/1996
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 P. O. BOX 4027 23-2116774	Not Applicable
Suite, Apt. #, etc. 22 Suite. Apt. #, etc. 27 5. Certificate of Status I	Desired S8.75 Additional Fee Required
City & State  City & State  BETHLEHEM, PA  6. Election Campaign F Trust Fund Contribution	
Zip Country Zip Country 8. This corporation has	liability for intangible tax under s. 199.032,
24 25 29 18018 - 0027 30 Florida Statutes  9. Name and Address of Current Registered Agent 10, Name and Address	Yes No of New Registered Agent
CORPORATION SERVICE COMPANY  81 Name	of new neglisiated Agent
TON LIAVE OT	
TALLAHASSEE FL 32314	ot Acceptable)
83	
04	los Turas
84 City	85 Zip Code
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signal re-type for posted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGE	DATE S TO OFFICERS AND DIRECTORS IN 12
THE PDC DELETE 1.1 TITLE PD	Change Addition
NAME TRECHAK, RICHARD B 1.2 NAME TRECHAK, RICHARD	) B.,
STHEET ADDRESS 824 12TH AVE. 1.3 STREET ADDRESS 824 12TH AVE.	
CHY-ST-ZIP BETHLEHEM PA 18018 1.4 CHY-ST-ZIP BETHLEHEM PA	18018
TITLE VD DELETE 2.1 TITLE C.D	☐ Change ☑ Addition
NAME PETRIE, FRANK W 22 NAME NEUBAUER, CARO	ou H.
STREET ADDRESS 824 12TH AVE. 2.3 STREET ADDRESS 824 12 TH AVE.	
	4 18018
TITLE VD DELETE 3.1 TITLE  NAME BURKE, GEORGE K JR 3.2 NAME	Change Addition
STREET ADDRESS 824 12TH AVE. 3.3 STREET ADDRESS	
CITY-ST-ZIF BETHLEHEM PA 18018 3.4. CITY-ST-ZIF	
TILE S DELETE 4.1 TILE	Change Addition
NAME MORRISON, HUGH M 4.2 NAME	-
STREET ADDRESS 824 12TH AVE. 4.3 STREET ADDRESS	
CITY-ST-ZIP BETHLEHEM PA 18018 44 CITY-ST-ZIP	
TITLE T DELETE 5.1 WILE	Change Addition
NAME YOUNG, THOMAS J 52 NAME	
STREET ADDRESS 824 12TH AVE. 5.3 STREET ADDRESS	
CITY 5" ZIP	Change Addition
NAME LARSON, RAY C 6.1 TITLE 6.2 NAME 6.2 NAME	LL CHANGE LL ACOUTON
STREET ADDRESS 824 12TH AVE.	
OUNCEL MODITOR   WEST TEST TO THE STATE	

14. Ido 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 oath; that I am an officer or director of the corp of tion or the received 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 guinged; of chan at a human with an address.

THOMAS J. YOULE

SIGNATURE:

VP - FINANCE