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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F95000004139 (0)

OSIRIS HOLDING CORPORATION

Principal Place of Business Mailing Address 3190 TREMONT AVENUE 3190 TREMONT AVENUE TREVOSE PA 19053-8644 TREVOSE PA 19053 3. Date Incorporated or Qualified 3a. Date of Last Report 08/28/1995 11/12/1996 4. FEI Number 2. Principa: Place of Business 2a. Mailing Address Applied For --**65-0206312**- 23-2587718 21 26 4126 Norland Avenue Not Applicable Suite, Apt. # leta Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Burnaby, B.C. Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 25 V5G 3S8 Canada Yes No 24 29 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typicd or ported name of registered agent and tick if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 13. DELETE kad Change Addition TITLE 1.1 TITLE NOT a director anymore MILLER, LAWRENCE NAME 1.2 NAME 383 STREET ROAD EAST 3190 Tremont Avenue 1.3 STREET ADDRESS STREET ADDRESS TREVOSE PA 19053 1.4 CITY-ST-ZIP CITY-ST-ZIP SD DELETE NOT a director anymore but __ Addition 2.1 TITLE TOTLE is VP/S/T/CFO SHANE, WILLIAM 2.2 NAME 383 STREET ROAD EAST 3190 Tremont Avenue STREET ADDRESS 2.3 STREET ADDRESS TREVOSE PA 19053 2 A CITY-ST-ZIP CITY - S1 - ZIP ATO XX DELETE 31 TITLE D Change Addition TITLE Raymond L. Loewen WAIMBERG, PAUL 32 NAME NAME 4126 Norland Avenue 3190 TREMONT AVENUE 3.3 STREET ADDRESS STREET ADDRESS Burnaby, B.C. Canada V5G 3S8 TREVOSE PA 19053 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE **KX** Addition TITLE 4.1 TITLE Change Peter S. Hyndman 4. 2 NAME NAME 4126 Norland Avenue 4.3 STREET ADDRESS STREET ADDRESS Burnaby, B.C. Canada V5G 3S8 4.4 CITY - ST - ZIP CITY-ST-21F Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

5.4 CITY - ST-ZIP

61 TITLE

6.2 NAME 63 STREET ADDRESS

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 angulat my 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 february february february for the corporation or the receiver or trustee empowered to execute this february f

SIGNATURE:

C-TY - ST - ZIP

STREET ADDRESS CITY - ST - ZIP

TITLE

NAME

Peter S. Hyndman

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1/13/97

(604) 299-9321

Change

FILED

Jan 27 1997 8:00am

Secretary of State

0007562

Addition