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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600004528 (3)

MEHL/BIOPHILE INTERNATIONAL CORPORATION

Principal Place of Business

4020 NEWBERRY ROAD SUITE 400

Mailing Address

4020 NEWBERRY ROAD SUITE 400 GAINESVILLE FL 32607-4809

FILED May 01 1997 8:00am Secretary of State



GAINESVILLE FL \$2807				GAINESVILLE FL 32607-4809						
								3. Date Incorporated or Qualified 3a. Date of Last Report 0 605/04/1996		
2. Principal Pl			2a	. Mailing Address				4. FEI Number Applied For		
	14127 NW 27th Lane			26				22-2408186 Not Applicable		
Suite, Apt. #, etc. 22 Suite A			27	Suite, Apt #, etc.				5. Certificate of Status Desired . 38.75 Additional Fee Required		
City & State				City & State			,	6. Election Campaign Financing \$5.00 May Be		
23			28			- 1	ſ	Trust Fund Contribution Added to Fees		
Žip	Country Zip			Country			8. This corporation has liability for intangible tax under s. 199.032,			
24 3260		25	29		30			Florida Statutes		
	9, Name	and Address of Curren	t Regis	stered Agent		ΙΞ,		10. Name and Address of New Registered Agent		
LEA	RY, KEVIN					81	Name			
		RRY ROAD SUITE 400					82 Street Address (P.O. Box Number is Not Acceptable)			
GAINESVILLE FL 32607				•		-	Sirect Address (P.O. Box Number is Not Acceptable) 4127 NW 27th Lane, Suite A			
1						83				
						84	City	FL 85 Zip Code 32606		
11. Pursuant t	o the provis	ions of Sections 607.050	and €	607.1508, Florida Statu	tes, the a	bovo	e-namod c	corneration submits this statement for the currose 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.										
=	ii igiiiiiai ii	itin, and accept the oblige	INIO IO E	31, Occitori 001:030B, 11	Onda Sia	uica	· .			
SIGNATURE	Signature, typed	for printed name of registered ager	ut and (c)	e l'applicante (NO	It Hegistere	d Agn	ud signature re	required whon reinstating) DATE		
12.		OFFICERS AND	DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC			DELETE	1.1 11	ILF		Change Addition		
NAME	MEHL, T	HOMAS L SR			1.2 N	AME				
STREET ADDRESS MIRAMAR STREET #610 SUITE				1.3 S		TREET	ADDRESS			
CITY-ST-ZIP		AN PR 00907-3224			1.4 C	HY-S	1 - ZIP			
TITLE	SD			2.1 Ti			Change Addition			
NAME	HIGH ICH YARIS HINGHIC			2.2 NA		AME				
STREET ADDRESS MIRAMAR STREET #610 SUITE				8A 2.3 S			ADDRESS			
CITY-ST-ZIP SAN JUAN PR 00907-3224							ST - ZIP			
TITLE	VC			DECETE	DECETE 3.1 TIT			Change Addition		
NAME	BORKOWSKI, ALLAN			3.2 N.		AME		NARDO ZAIAS		
STREET ADDRESS	TREET ADDRESS 1 HORIZON ROAD SUITE 602			3.3 \$			ADORESS	5189 Alton Road		
CITY-ST-ZIP	FORT LE	E NJ 07024			3.4 (IIY-S	57 - 71P	Miami Beach, FL 33140		
TITLE				DELETE	4.1 TI			Change Addition		
NAME					4. 2 N	IAMI				
STREET ADDRESS					4.3 S	TREET	ADORESS			
CITY-ST-ZIP					4.4 CI	ITY - S'	T-ZIP			
TITLE				DELETE	5.1 11	116		Change Addition		
NAME					5.2 N	AME				
STREET ADDRESS					5.3 S	REET	ADDRESS			
CITY-ST-ZIP						ITY - ST	1			
TITLE				DELETE	6.1 11			Change Addition		
NAME					6.2 N	AME				
STREET ADDRESS					6.3 S	IKEE1	ADDRESS			
CITY-ST-ZIP						IIY-S'				
14. I do hereb	y certify tha	t the information supplied	with t	his filing does not qual	ify for the	exel	mption sta	ated 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.										