

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

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000000654

1. Corporation Name

LIFEBLOOD BIOMEDICAL, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
February 7, 1997

2. Principal Place of Business 21 101 Southhall Lane 22 Suite, Apt. #, etc. #400 23 City & State Maitland, FL 24 Zip 32751 25 Country USA	2a. Mailing Address 26 101 Southhall Lane 27 Suite, Apt. #, etc. #400 28 City & State Maitland, FL 29 Zip 32751 30 Country USA	4. FEI Number 84-1366778 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No
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9. Name and Address of Current Registered Agent

Jeffrey Mann

10. Name and Address of New Registered Agent

81 Name Jeffrey Mann 82 Street Address (P.O. Box Number is Not Acceptable) 101 Southhall Lane, #400 83 84 City Maitland FL 85 Zip Code 32751

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 of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/17/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME		1.2 NAME	Jeffrey Mann
STREET ADDRESS		1.3 STREET ADDRESS	101 Southhall Lane, #400
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Maitland, FL 32751
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	

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***150.00

14. I, the undersigned, being duly sworn, depose and say that the foregoing does not qualify for the exemption stated in Section 607.0502, Florida Statutes, and that the corporation has not qualified for the exemption stated in Section 607.0502, Florida Statutes. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. Jeffrey Mann 2/17/98 407-660-6656

CP2E034 (10/97)