FILI	E NOW: FILI	NG FEE AFTE	FILED							
	PROFIT FLORIDA DEPAR CORPORATION SANGER			TMENT OF STATE		Apr 21 1998 8:00am				
	JAL REPORT		Sandra B. Mortham Secretary of State							
	1998		DIVISION OF CORPORATIONS			Secretary of State				
DOCU 1. Corporation	MENT # on Name	H52354	(8)							
BLOIS	s & Blois Stud	DIOS, INC.								
•	e of Business	М	ailing Address		•	-{	I BIO4 BIOII \$7011 DIQII		() 410 () (40)	
5288 N.W. 89TH DRIVE 5288 N.W. 89TH DRIVE CORAL SPRINGS FL 33067 CORAL SPRINGS FL 330						DO NOT WRITE	E IN THIS SPACE	:		
						3. Date Incorporated or Qualified			rando e de la composição	7
2. Principal P	Place of Business	2a.	Mailing Address	1 -+ 1 .		04/16/1985 4. FEI Number		App	lied For	-
21 25 74 Suite, Apt		26	2-5 74 N) Suite, Apt. #, etc.	138m 14		59-2532815	60		Applicable]
22		27				5. Certificate of Status Desired	1 1 7 -	ee Req	ditional Julred	
23 30 C	MOTAN A	FL. 28	 	aton FL		Election Campaign Financing Trust Fund Contribution	A	5.00 M	Fees	
^{Zip} う3	434 25	"Š A 29	Zip 33434	Country A		8, This corporation owes or has pa Personal Property Tax due June		ar Intar	•	
	 Name and Add VEISS, JAN 	ress of Current Regis	tered Agent	B1 Name		10. Name and Address of New Re	gistered Agent			7
	170 W. CAMINO GA	RDENS BLVD.				ss (P.O. Box Number is Not Acceptal	nie)			-
-	F345 POCA BATON EL 22	1400		83						4
ľ	BOCA RATON FL 33	1432					la-I	7: 0]
				. [.]			FL 85	Zip Co		
office or r agent. I a	to the provisions of Se registered agent, or bo im familiar with, and ac	ections 607.0502 and 6 oth, in the State of Florid ocept the obligations of	07.1508, Florida Statut da. Such change was I, Section 607.0505, Fl	tes, the above-named authorized by the co- orida Statutes.	d corpo rporatio	xation submits this statement for the pon's board of directors. I hereby acce	ourpose of chang pt the appointme	jing its nt as re	registered egistered	
SIGNATURE	Signature, typed or printed na	nie of registated agricit and little	if applicable (NOI	IE: Registered Agent signatu	a required	d when re-instating)	DATE			
12.		OFFICERS AND DIREC		13.	1	ADDITIONS/CHANGES TO OFFICE				16
TITLE NAME	PVST BLOIS, DORO	THY	DELETE	1.1 TITLE 1.2 NAME		PVST LOIS DAROTHY	⊠ .Ch	ange	Addition	R2E034 (10/97
STREET ADORESS	5288 NW 89 D	NR .		1.3 STREET ADDRESS		LOIS DEROTHY 574 NW 38 H ST				
CITY-ST-ZIP	CORAL SPRIN	GS FL	OF LETT	1.4 CITY-ST-ZIP	5	WCA RATON FL 3	3434		T	<u> </u>
TITLE NAME			DELETE	2.1 TITLE 2.2 NAME			L Ch	ange	Addition	۲
STREET ADDRESS				2.3 STREET ADDRESS						
CHTY-ST-ZIP				2.4 CITY-ST-ZIP	ļ					
TITLE NAME			□ DELETE	3.1 TITLE 3.2 NAME			☐ Ch	ange	☐ Addition	
STREET ADDRESS				3.2 NAME 3.3 STREET ADDRESS						
CITY-ST-ZIP				34. CITY-ST-ZIP						
TITLE			☐ DELETE	41 TITLE			☐ Ch	ange	Addition]
NAME STREET ADDRESS				4. 2 NAME	Ì					1
CITY-ST-ZIP				4.3 STREET ADDRESS 4.4 CITY - ST - ZIP						
TITLE			☐ DELETE	5.1 TITLE			☐ Ch	ange	Addition	1
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET ADDRESS						
CITY-ST-ZIP TITLE			DELETE	5.4 CHTY-ST-ZIP 6.1 TITLE	+		☐ Ch	ange	Addition	1
NAME		/		6.2 NAME						
STREET ADORESS		,		6.3 STREET ADDRESS						
14. I hereby o	certify that the informat	ion supplied with this fi	iling does not qualify for	6.4 CITY-ST-ZIP or the exemption stat	L ed in S	ection 119.07(3)(i), Florida Statutes. I	further certify that	at the ir	nformation	1
indicated officer or	on this annual report of director of the corpora	or sunniemental annual	I report is true and acc trustoe empowered to	curate and that my si-	anatura	s shall have the same legal effect as ir red by Chapter 607, Florida Statutes;	f made under nat	h-that	l am an	

CIGNATURE.

4/15/98

561 988 8819