FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

J68353

(8)

MANATEE LABORATORIES, INC.

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Principal Place	of Business	Mailing Address				AA KILI BIBID BIBII	ALBIL MIRIT ATAIN BIA31 20 BF
	K ST/ PORT MANATEE		990 N DOCK ST/ PORT MANATEE				
PALMETTO FL 34221-3605		PALMETTO FL 34221	PALMETTO FL 34221-3605		3. Date Incorporated or Qualified 3a. Date of Last Report 04/17/1987 04/28/1995		, i
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number Applied For		
21		26			59-2796654 Not Applicable \$8.75 Additional		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	n		5. Certificate of Status Desired	Fee Required	
City & State			City & State		6. Election Campaign Financing \$5.00 May Be		
23		28	├ ── '		Trust Fund Contribution LJ Added to Fees		
Zip	Country	Zip	Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes		
24	25	29	30				
	9. Name and Address of Curr	ent Registered Agent		81 Name	10. Name and Address of New F	edistelen vå	ent
	OON, MARIE		82 S		dress (P.O. Blox Number is Not Acceptable)		
	ND ST. NE. Enton Fl 34208			83			
DIVADE	NION FL 34200			24 00			85 Zip Code
				84 City		┡┖┊	
or register familiar wit	ed agent, or both, in the State of Fi th, and accept the obligations of, Se	orida. Such change was authorized to the control of	s.	orporation's boa	ration submits this statement for the puring of directors. I hereby accept the app	ointment as re	gistered agent. I am
	Signature typed or printed name of registered ag	ent and tille if applicable (NO AND DIRECTORS	OTE: Registered .	Agent signature require	ADDITIONS/CHANGES TO OFF		RECTORS IN 12
12.	P	DELETE	1.1 TI	TLE	ADDITIONS OF A TOP OF T		Change Addition
NAMÉ	CALHOON, MARIE	G	1.2 NA	i			
STREFT ADDRESS	206 22ND ST. N.E.		1.3 ST	REFT ADDRESS			
CITY - ST - ZIP	BRADENTON FL		1401	1Y-ST-ZIP			
TIFLE	ST	DELETE	2 1 TI	TLE			Change
NAME	CALHOON, MONA		2 2 NA				
STREET ADDRESS	206 22ND ST. N.E.			REET ADDRESS			
CITY-ST-ZIP	BRADENTON FL	☐ DELETE	2 4 CI	TY - ST - ZIP			Change Addition
THILE		[] DECEN	3 2 NA	i			· •
NAME exerci anopece				IREET ADDRESS			
STREET ADDRESS CITY-S1-ZIP				TY-ST-ZIP			
TITLE		☐ DELETE	4.11				Change Addition
NAME			4.2 NA	AME .			
STREET ADDRESS				REE1 ADDRESS			
CHY-ST-ZIP		57.05.516		TY-ST-7IP		m	Change Addition
TITLE		DELETE	5 1 7			L	Change Addition
NAME			52 N/				
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP	 	☐ DELETE	6. 1 T	TY-ST-ZIP			Change
TIPLE			6.2 N	Ļ		_	
NAME STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
UITT-51-41F		ad with this files is unlusterly for			for the exemption stated in Section 11	07(3)(k), Florid	da Statutes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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.

SIGNATURE:

MATURE AND TYPED OR PRINTED NEW OF SIGNING OFFICER OR DIRECTOR

04-18-96 (941)723-2263