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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

1999

DOCUMENT # J74062

DIVERSIFIED BIO-CONSULTANTS, INC.

Principal Place of Business 4106 TERIWOOD AVE. ORLANDO FL 32812  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 05/20/1987  4. FEL Number 26-2722782  Suite, Apt. #, etc. Suite, Apt. #, etc.  27  City & State City & State  28  City & State 29  Zip Country Zip Country Zip Country Zip Added to Fees  PALMER, HUGH M. ESQ 1150 LOUISIANA AVE SUITE 4 WINTER PARK FL 32789  Mailing Address 4. FEL INImber 26-2722782  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 05/20/1987  4. FEL Number 26-2722782  Suite, Apt. #, etc.  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution Fee Required  5. Country 8. This corporation owes the current year Intangible Personal Property Tax. Yes No  10. Name and Address of New Registered Agent  81 Name PALMER, HUGH M. ESQ 1150 LOUISIANA AVE SUITE 4 WINTER PARK FL 32789
4106 TERIWOOD AVE. ORLANDO FL 32812  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 05/20/1987  2. Principal Place of Business 2a. Mailing Address 25 26-2722782  Suite, Apt. #, etc. 27 27 28 29 20 27 21 28 29 20 20 27 20 20 21 21 22 21 27 28 20 20 21 27 20 20 21 21 20 21 21 21 22 22 21 27 21 28 28 29 29 20 20 20 20 21 20 20 21 20 21 21 20 21 21 21 22 22 23 21 24 25 29 20 20 20 20 20 20 21 20 20 20 20 20 20 21 20 20 20 20 20 20 20 20 20 20 20 20 20
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3. Date Incorporated or Qualifed 05/20/1987  2. Principal Place of Business 2. Applied For 26-2722782  Suite, Apt. #, etc.  Suite, Apt. #, etc.  2. City & State  City & State  City & State  2. Country  2. Principal Place of Business  2. Applied For 26-2722782  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fee Required  Fee Requ
2. Principal Place of Business  2a. Mailing Address 2b. Let Number 2c. Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  Zip  Country  Zip  Country  25  30  Personal Property Tax.  9. Name and Address of Current Registered Agent  PALMER, HUGH M. ESQ 1150 LOUISIANA AVE SUITE 4  WINTER PARK FL 32789  Applied For  Applied For  Not Applied For  Not Applied For  Streek Address  4. FEI Number 26-2722782  5. Certificate of Status Desired  Fee Required  5. Certificate of Status Desired  Fee Required  5. Certificate of Status Desired  Fee Required  Fee Required  5. This corporation owes the current year Intangible Personal Property Tax.  Yes No  10. Name and Address of New Registered Agent  FL 85 Zip Code  Streek Address (P.O., Box Number is Not Acceptable)  Streek Address (P.O., Box Number is Not Acceptable)  Streek Address (P.O., Box Number is Not Acceptable)  Winter PARK FL 32789
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Applied For 26-2722782 2. Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fee Required  Fee Required  City & State  City & State  City & State  Zip  Country  Zip  Country  Zip  Country  2. Since Country  2. Since Country  2. Since Address of Current Registered Agent  PALMER, HUGH M. ESO 1150 LOUISIANA AVE SUITE 4  WINTER PARK FL 32789  4. FEI Number 26-2722782  5. Certificate of Status Desired  Fee Required  6. Election Campaign Financing Thus Fund Contribution  St. Out of Status Desired  Fee Required  Fee Required  Fee Required  St. Out of Status Desired  Fee Required  Fee Required  Fee Required  St. Out of Status Desired  Fee Required  St. Out on Status Desired  Fee Required  Fee Re
21
Suite, Apt. #, etc.  Suite, Apt. #, etc.  22  City & State  City & State  City & State  23  Zip  Country  Zip  Country  Zip  Country  29  30  Summe and Address of Current Registered Agent  PALMER, HUGH M. ESO 1150 LOUISIANA AVE SUITE 4  WINTER PARK FL 32789  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certifcate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  Street Address of New Registered Agent  8. This corporation owes the current year Intangible Personal Property Tax.  Yes No  10. Name and Address of New Registered Agent  81 Name  Suite Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suite Address (P.O. Box Number is Not Acceptable)
5. Certificate of Status Desired Fee Required Fee Required Fee Required  City & State  6. Election Campaign Financing Added to Fees  Trust Fund Contribution Added to Fees  8. This corporation owes the current year Intangible Personal Property Tax. Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
City & State  Country  Added to Fees  Trust Fund Contribution  Added to Fees
Trust Fund Contribution Added to Fees  Zip Country Zip Country  25 29 30 Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  PALMER, HUGH M. ESO 1150 LOUISIANA AVE SUITE 4 WINTER PARK FL 32789  Trust Fund Contribution Added to Fees  8. This corporation owes the current year Intangible Personal Property Tax.  10. Name and Address of New Registered Agent  81 Name Cank G. Fink Deiner  82 Street Address (P.O., Box Number is Not Acceptable)  83 Victor Address (P.O., Box Number is Not Acceptable)  84 City Or Au de FL  85 Zip Code
Zip Country Zip Country  Zip Country  8. This corporation owes the current year Intangible Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  PALMER, HUGH M. ESQ  1150 LOUISIANA AVE  SUITE 4  WINTER PARK FL 32789  8. This corporation owes the current year Intangible Personal Property Tax. Yes No  8. This corporation owes the current year Intangible Personal Property Tax. Yes No  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation owes the current year Intangible Personal Property Tax.  8. This corporation of the Personal Property Tax.  8. Name of Call Property Tax.  8. Name of Call Property Tax.  8. Name of Call Property Tax.  8. Call Property Tax.  8. Name of Call Pro
24 25 29 30 Personal Property Tax. Yes No  9. Name and Address of Current Registered Agent  PALMER, HUGH M. ESO 1150 LOUISIANA AVE SUITE 4 WINTER PARK FL 32789  30 Personal Property Tax. Yes No  10. Name and Address of New Registered Agent  81 Name Fank G. Fink Deiner  82 Street Address (P.O., Box Number is Not Acceptable)  83 Street Address (P.O., Box Number is Not Acceptable)  84 City Or Andre FL  85 Zip Code
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PALMER, HUGH M. ESO  1150 LOUISIANA AVE  SUITE 4  WINTER PARK FL 32789  81 Name Frank G. Fink Deiner  82 Street Address (P.O., Box Number is Not Acceptable in Tell 30)  83 WINTER PARK FL 32789  84 City Or (a., db FL 85 30)
PALMER, HUGH M. ESQ  1150 LOUISIANA AVE  SUITE 4  WINTER PARK FL 32789  PALMER, HUGH M. ESQ  Streef Address (P.O., Box Number is Not Acceptable) in Te 30/  82 Streef Address (P.O., Box Number is Not Acceptable) in Te 30/  83 Streef Address (P.O., Box Number is Not Acceptable) in Te 30/  84 City Or (Au. do FL 85 30 30/
SUITE 4 WINTER PARK FL 32789  82 Street Address (P.O. Box Number is Not Acceptable in Tell 30)  83 Street Address (P.O. Box Number is Not Acceptable in Tell 30)  84 City Or (au do FL 85 30)
SUITE 4 WINTER PARK FL 32789  84 City Or (a) do FL 85 Zip Code ()
WINTER PARK FL 32789  84 City Or (a) do FL 85 Zip Code ()
FL 85 Zip Code O
1 Clara FL 3280
11. Pursuant to the provisions of Sections 607.0592 and 607.1508, Flanda Statutes, the above-named corporation submits this statement for the purpose of changing no registered of the corporation's board of directors. I hereby accept the appointment as registered
11. Pursuant to the provisions of Sections 607,0592 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered egent of both, in the State of Florida Such phage 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 1,500, Florida Statutes.
SIGNATURE (NOTE: People from 1 singular production of the producti
Signature, Need or printed harde of registered agent and the in appricable. (Note: Registered Agent and the in appricable.)
12. / OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TUDE D DELETE 1:1 TITLE Change Addition
Mile   U
NAME NAYYAR, G.M. 12 NAME
STREET ADDRESS 4106 TERIWOOD AVE 1.3 STREET ADDRESS
CITY-ST-ZIP
NAME 22 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
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1 $lacksquare$
CITY-ST-ZIP 4.4 CITY-ST-ZIP
CITY-ST-ZIP
Change Addition

CITY-ST-ZIP 14. I 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 and that 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 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, with all other like empowered.

54 CITY-ST-ZIP

6.3 STREET ADDRESS

64 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

□ DELETE

Difector 2/2/99 (407) 857-1548

☐ Change

Addition

**FILED** 

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90129 048 \*\*\*158.75