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

PROFIT CORPORATION ANNUAL REPORT

DRATION REPORT FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 18 1998 8:00am Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State City & State Zip Country Suite. Apt. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Status Desired Status Desired Fee Required Status Desired Status Desired Status Desired Fee Required Status Desired Fee Required Status Desired Status Desired Fee Required Status Desired Fee Required Status Desired Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Status Desired Status Desired Fee Required Status Desired Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Status Desired Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Status Desired Status Desired Fee Required Fe	`	1998	DIVISIO	N OF CORPORA	TIONS			-
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CO J. KENN DRAKE, P.A. 1928 SANSOTA FL. 9428	Principal Plans	e of Business	Mailing Address				I OLEK BION BIO	/II #1011 10 1 1
2. Principal Place of Business 2. Making Address 3. 4. Fill Number Applied For 28 28 38 55-0109767 Not Applied For 28 28 38 55-0109767 Not Applied For 28 29 29 20 20 20 20 20 20	C/O J. KEVIN DRAKE. P.A. C/O J. KEVIN DRAKE. P.J. 1343 MAIN ST., STE. 204 1343 MAIN ST., STE. 204					DO NOT WRITE IN THIS	SPACE	
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Section Post		Country		Cour	ntry			
DRAKE, J. KEVIN 1343 MAIN ST., STE. 204 SARASOTA FL 34236 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL ST Zip Code 95 City FL ST Zip Code 96 City FL ST Zip Code 97 City FL ST Zip Code 98 City FL ST Zip Code 99 City FL ST Zip Code 90 City FL ST Zip Code 90 City FL ST Zip Code 90 City FL ST Zip Code 91 City FL ST Zip Code 92 City FL ST Zip Code 93 City Code 94 City FL ST Zip Code 95 City Code 96 City FL ST Zip Code 96 City FL ST Zip Code 97 City Code 97 City Code 98 City Code 98 City Code 99 City 99 City Code 90 C	24			30		Personal Property Tax due June 30.	Yes [
11. Pursuant to the provisions of Sections 607.0502 and 607 1508, Fiorida 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 Schitches, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Schitches, 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 Schitches, 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 Schitches, 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 Schitches, 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 Schitches Schitches, 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 Schitches Schitches, the above-named corporation submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered office of the submits this statement for the purpose of changing its registered of the submits statement for the purpose of changing its registered			ent Registered Agent		-dT	10. Name and Address of New Registered	Agent	
SARASOTA FL 34236 Salar S					Name			1
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 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, 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, or an amount of 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, 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, or both in the statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes. IGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.				լ		fress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607 1508. Florida Stahutes, 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, or had accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or had accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or host and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or host and accept the obligations of, Section 607.0505, Florida Stahutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or host and accept the obligation's Section 607.0505, Florida Stahutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as a registered agent, or board of directors. I hereby accept the appo				Į.	-3			1
11. Persuant 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 agent. I am familiar with, and accept the obligations of, Section 607-0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS TITLE PD DELETE 11. TITLE AAAMU, HASSAN DR. 12. SIRRET ADDRESS CITY-ST-2P 14. GOTS-ST-2P 15. STRET ADDRESS CITY-ST-2P 16. DELETE 17. TITLE 18. STRET ADDRESS CITY-ST-2P 19. DELETE 19. DELETE 19. DELETE 19. DELETE 19. TITLE 19. DELETE 19. DELETE 19. TITLE 19. DELETE 19. DELETE 19. TITLE 19. DELETE					64 City	EI.	85 Zip	Code
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		ertify that the Information supplied	with this filing does not qu			Section 119.07(3)(i), Florida Statutes. I further co	artify 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 for on at attachment with an address.

SIGNATURE:

DR. HASSAN ADAM

11/3/98

234-2618403