, FILP NOW; FILING FEE AFTER MAY 1ST IS \$558.00

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # L12712 (
1. Comporation Name Terry Laboratories, Inc.

Principal Place of Business Mailing Address												
390 North Wickham Road 7501 E. McCormick Pkwy								→				
Suite F Scottsdale, AZ 85258								8	DO NOT WRITE	INI THIS S	SPACE.	
Melbourne, FL 32935								DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
								ļ				-
2. Principal Place of Business 2a. Mailing Address									8/29/89 4. FEI Number			^
2. Principal Place of Business									65-0140334			Applied For
21 Cuito Ant	1 # alo	Suite, Apl. #, etc.					 -∤	03-0140334			Not Applicable Additional	
Suite, Apt. #, etc			27					- }	5. Certificate of Status Desired			Required
City & Sta		City & Stato						A 51 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -				
23	ac.	28					Election Campaign Financing Trust Fund Contribution			May Be d to Fees		
Zip	Cour	Ziρ Country					8. This corporation owes or has pa					
24	25		29	30			,		Personal Property Tax due June			□ No
9. Name and Address of Current Registered Agent							10. Name and Address of New Regist					
81 Name										3		
Jim Gambino												
390 North Wickham Road						82 Street Addre			s (P.O. Box Number is Not Acceptab	ile)		
Suite F						63						
Melbourne, FL 32935						63						1
					Ţ	84	City			FL	85 Z I	o Code
		002.0500	. 607.4600									
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 bottli, in this 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 onligations of, Section 607 0505. Florida Statutes.												
agent La	am familiar with, and a	acept the onlight	ons of, Section	n 607.0505, Flor	rida Statu	ites.	i					
SIGNATURE												
	Signature typed or perfect re	OFFICERS AND		e (NO1E	Registered	Age	nt signature rec	dated A	whon reinstating) ADDITHONS/CHANGES TO OFFICE	DATE CEDS AND	DIDECTO	NO 111 40
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NAME					6.2 NAM				-05/19/98010	1190	16	N 112
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14. Thereby 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 supplier ental around report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or fusite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changer or on an attachment with an address.

4/20/98

602-998-8888

FILED

May 18 1998 8:00am

Secretary of State