DOCUI	MENT # L67337		(R)	FILED Aug 04, 2000 8:00 an Secretary of State 08-04-2000 90006 016 ***150.00	n	
Principal Place of Business 1850 N.W. 69TH AVENUE SUITE 1 PLANTATION FL 33313		Mailing Address 1850 N.W. 69TH AVENUE SUITE 1 PLANTATION FL 33313				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 65-0202313 Applied For Not Applicable	e	
Zip	Country	Zip	Country	5. Certificate of Status Desired  See Required		
6. Name and Address of Current Regis MUNDSCHENIK, DAVID D. 504 SE 2ND AVE DANIA FL 33004		legistered Agent	Name	7. Name and Address of New Registered Agent	7	
			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
					-	
			City	FL Zip Code	-	
9. This corpo Tax filing re (See criter	Signature, typed or printed name of registered agent an ration is eligible to satisfy its Intangible equirement and elects to do so. Ia on back)	FILE NOW After SEPTEMBER 1 Make Check Payat	E: Registered Agent signature requ III FEE IS \$550.00 13, 2000 Min. will be \$7 ble to Department of S	10. Election Campaign Financing       \$5.00 May Be         750.00       Trust Fund Contribution.       Added to Fees         State       State       State		
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC MUNDSCHENK, DAVID D 504 SE 2ND AVE. DANIA FL 33004	DIRECTORS	12. TITLE NAME STREET ADDRESS CITY - ST - ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MUNDSCHENK, SUZANNE 504 SE 2ND AVE. DANIA FL 33004	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change 🗌 Addition	Ë	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change 🗌 Addition	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗔 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	🗋 Change 🔲 Addition	1	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
indicated of the cor	on this report or supplemental report is t coration or the receiver or trustee empov or on an attachment with an address, wi	true and accurate and that r wered to execute this report	my signature shall have th as required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if Date Daytime Phone #		





July 25, 2000

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Florida Department of State P.O. Box 6327 Tallahassee, Florida 32314

Re: Annual Report for International Pharmaceuticals for 2000 document #167337

I have four Companies in which I am filling every April the Annual Report. They are:

Phylomed Corporation Document #M00861

Professional Veterinary Products, Inc. Document #PQ92428

Modern Medical technology, Inc.Document #NI4687

International Pharmaceuticals and Cosmetics, Inc.Document# L67337

For some reason the check for International Pharmaceuticals and Cosmetics, Inc. seem to have been lost in the process and never clear my Bank as of today.

After talking to the Divisions of Corporations Department this morning in Tallahassee, they suggest me to send you another check for the International Pharmaceuticals, Inc. annual report.

If you have any questions, please don't hesitate to call me at (954)321-5553

Thank you for your time

Munducherkser.

Suzanne Mundschenk Secretary

Ft. Lauderdale Office 1850 NW 69th Avenue, suite 3, Plantation, FL 33313 (305) 321-5553 • Fax: (305) 321-5630