

CORPORATION
 ANNUAL REPORT
1995

 COMMONWEALTH OF MASSACHUSETTS
 DEPARTMENT OF STATE
 100 STATE STREET
 BOSTON, MA 02109
 TEL: 617-725-6000 FAX: 617-725-6001

(1)

0-100-10983

Protein	BB (%)	TBBM (%)
Na ⁺ /K ⁺ ATPase	100	100
Na ⁺ /H ⁺ exchanger	100	100
Na ⁺ /glucose cotransporter	100	100
Na ⁺ /amino acid cotransporter	100	100
Na ⁺ /H ₂ O cotransporter	100	100
Na ⁺ /Cl ⁻ cotransporter	100	100
Na ⁺ /Ca ²⁺ cotransporter	100	100
Na ⁺ /Mg ²⁺ cotransporter	100	100
Na ⁺ /Zn ²⁺ cotransporter	100	100
Na ⁺ /Fe ²⁺ cotransporter	100	100
Na ⁺ /Cu ²⁺ cotransporter	100	100
Na ⁺ /Mn ²⁺ cotransporter	100	100
Na ⁺ /Ni ²⁺ cotransporter	100	100
Na ⁺ /Co ²⁺ cotransporter	100	100
Na ⁺ /V ²⁺ cotransporter	100	100
Na ⁺ /Cr ²⁺ cotransporter	100	100

$\{x_1, x_2, \dots, x_n\} \subseteq \mathbb{R}^n$ and $\{y_1, y_2, \dots, y_n\} \subseteq \mathbb{R}^n$ are two sets of vectors in $\mathbb{R}^n$ such that

1425 TUSCAWILLA RD WINTER SPRINGS FL 32708 US	167 LOOKOUT PLACE MAITLAND FL 32751
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2. Date of Birth of Applicant		2a. Amount of Fees		3. Date Incorporated or Organized		3a. Date of Last Report	
21		25		06/26/1990		05/01/1994	
State, Apt. #, etc.		State, Apt. #, etc.		4. FFI Number		Applied Fee	
22		27		59-3026650		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip		Zip		7. This corporation has liability for contribution to Florida State		☐ Yes ☐ No	
24		29		25		30	
City		City		State		City	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DISPASQUA, PETER JR
167 LOOKOUT PLACE
MAITLAND FL 32751

01	Name	
02	Street Address (P.O. Box Number is also acceptable)	
03		
04	City	
05	Zip Code	

11. Pursuant to the provisions of Sections 603 and 607 of the Florida Statutes, the above named corporation submits this statement for the purposes 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607 of the Florida Statutes.

SIGNATURE

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Fig. 1. Histogram of the number of *Ph. phaeocephala* eggs per 100 g of soil.

2.2

[illegible][illegible]

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF ISSUING OFFICER OR DIRECTOR