CORI ANNU	PROFIT PORATION AL REPORT			B Mortham ry of State					
OCUN . Corporation	MENT # M50	6683	(9)						
DERMO	OGENE CORP.								
Principal Place	of Business	Mailin	ıçı Address					illi t ibil bibil bibil bibil	01011 01311 1351
	DE LEON BLVD ES FL 33146)1 PONCE DE LEON RAL GABLES FL 33						
CONNE GABI	10 (1 0014)	v				3. Date Incorporated or Qua 07/28/1987	alified	3a. Date of Last Re 06/05/199	•
	ice of Business		lailing Address			4. FEI Number 65-0423262		ļ	Applied For Not Applicable
Suite, Apt. #	, etc	26	uite, Apt. #, etc.			5. Certificate of Status Desi	red	\$8.75	Additional
2		27	sty & State			6. Election Campaign Finance	, -	- ree i	Required May Be
City & State		28	sty & States			Trust Fund Contribution		☐ Adde	d to Fees
Zip 1	Country 25	29 29	þ	Country 30	À	8. This corporation has liable Florida Statutes	lity for int ☐ Yes	tangible tax under s No	199.032
1	9. Name and Address of		ed Agent			10. Name and Address of	New Re	gistered Agent	
				81					
AL LANGE OF	ING, ROBERT J			82	2 Street Add	lress (P.O. Box Number is Not Ac	ceptable))	
4401 PC	ONCE DE LEON BLVD GABLS FL 33146			83	3				
4401 PC CORAL	ONCE DE LEON BLVD GABLS FL 33146 o the provisions of Sections 6 ed agent, or both, in the State	e of Florida, Such d	hange was authorizi	es, the above	4 City	oration submits this statement for ard of directors. I hereby accept t	the purpoine appoin	FL see of changing its	o Code egistered offic Lagent I ann
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SIGNATURE:

305-446-5666