FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)M99402 S. RICHARD SAUBER, PH.D., INC. Principal Place of Business Mailing Address 17829 SCARSDALE WAY 17829 SCARSDALE WAY **BOCA RATON FL 33496 BOCA RATON FL 33496** DO NOT WRITE IN THIS SPACE HS 3. Date Incorporated or Qualified 09/20/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0083189 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name SAUBER, RICHARD S. 17829 SCARSDALE WAY Street Address (P.O. Box Number is Not Acceptable) **B2 BOCA RATON FL 33496** 83 84 City 85 Zip Code soctions 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ascept the obligations of Section 607.0505. Florida Statutes. Pursuant to the provision office or registered agent agent. I am familiar with. Signature, typed or pri and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, OFFICERS AND DIRECTORS 13. DELETE TITLE Change Addition 1.1 BTLE SAUBER, S. RICHARD NAME 1.2 NAME 17829 SCARSDALE WAY STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CiTY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-\$T-ZIP 3.4. CITY-ST-ZIP TITLE DFLETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

64 CITY-ST-ZIP

14. I hereby 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 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 instead provered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on in florence of the corporation of the receiver o

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

CIONATURE.

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

3/12/98

(561) 750 -92.00

Change

Addition

CR2E034 (10/97