

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005680

FILED  
Apr 10, 2012  
Secretary of State

Entity Name: BIOINNOVATOR INC.

**Current Principal Place of Business:**

372-3 PRESTWICK CIRCLE  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

222 LAKEVIEW AVENUE  
PH4  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

222 LAKEVIEW AVENUE  
PH4  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAMANNA, MARGARET M MD  
222 LAKEVIEW AVENUE  
PH4  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LAMANNA, MARGARET M  
Address: 222 LAKEVIEW AVENUE PH4  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D  
Name: LEVIN, MANUEL M ESQ.  
Address: 222 LAKEVIEW AVENUE PH4  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARGARET M. LAMANNA M.D.                      D                      04/10/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date