2005 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 07, 2005 08:00 AM DOCUMENT # P01000047112 **Secretary of State** 1. Entity Name TISSUETECH, INC. Principal Place of Business Malling Address 7000 SW 97 AVE. 7000 SW 97 AVE. STE. 212 STE. 212 MIAMI, FL 33173 MIAMI, FL 33173 02032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1116071 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent TSENG, AMY H DO NOT WRITE 10000 SW 63RD PLACE PINE CREST, FL 33156 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 U000000218310 Trust Fund Contribution. Added to Fees 02/07/05-80059-021 150.00 OFFICERS AND DIRECTORS 10. TITLE TSENG, SCHEFFER C MD, PHD NAME 10000 SW 63RD PLACE STREET ADDRESS CITY-ST-ZIP PINECREST, FL 33156 PD TITLE TSENG, AMY H NAME STREET ADDRESS 10000 SW 63RD PLACE CITY-ST-ZIP PINECREST, FL 33156 n TITLE HSIAO, JANE H NAME STREET ADDRESS 3210 HUNTER ROAD DO NOT WRITE CITY-ST-ZIP FORT LAUDERDALE, FL 33331 IN THIS SPACE TITLE YILING, HSU NAME STREET ADDRESS 13457 SW 59 AVE CITY-ST-ZIP PINE CREST, FL 33156 TITLE YEH, BILLY K NAME 13611 DEERING BAY DR., #801 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33158 TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .

SIGNATURE AND TYPED OR PRINTED

FILED