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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 14, 1999 8:00 am Secretary of State 04-14-1999 90068 037 ***150.00

DOCUMENT # POSH 67	10				
1. Corporation Name SEROLOG-ICALS, I	-NU				
•		325993-90068-	<u>y</u> 3 *		
		325993 - 90068	3/		
Principal Place of Business Mailing Address		~			
•					
		DO NOT WRITE IN THIS	SDACE		
		3. Date Incorporated or Qualifed ,	JEAUL -	·	
		2128 1985	5		
2. Principal Place of Business 2a. Mailing Address		4. FEI Number	App	olied For	
21 180 Park North Blud 26 780 Park North Blud		59-25 02415	Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc	- 110	5. Certifcate of Status Desired	\$8.75 A	i i	
22 Suite 1/D 27 Hust	e 110	<u> </u>	Fee Re	·	
City & State	WA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	· · · · · · · · · · · · · · · · · · ·	
Zip Country Zip	Country	8. This corporation owes the current year Int			
24 3002 25 29 3002 30	<u> </u>	Personal Property Tax.		<u> </u>	
9. Name and Address of Current Registered Agent	t 81 Name	10. Name and Address of New Registered	Agent		
CORPORATION SERVICE COMPANY	1 📖				
1001 Hay Clark	82 Street Addre	ess (P.O. Box Number is Not Acceptable)			
1201 Houp Street	83				
Suite 105_	24 00		as Zin C	·odo	
Tallahassee FL 32301	84 City	FL	85 Zip C	ode	
 Pursuant to the provisions of Sections 667,0502 and 607,1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth 	the above-named corpo	pration submits this statement for the purpose of	changing its	registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida	onzed by the corporation a Statutes.	n's board of directors. Thereby accept the appoi	illitierit as reg	listered	
SIGNATURE					
	gistered Agent signature required	when reinstating) DATE		,	_
	42	ADDITIONS/CHANGES TO DEFICERS AN	ID DIRECTO	RS IN 12	80
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12	11/98)
TITLE Secretary DELETE	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AN			(11
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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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

SIGNATURE: