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NON-PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P12641

(7)

1. Corporation Name

SCIENTIFIC PRODUCTS, INC.



Principal Place of Business

2665 SOUTH BAYSHORE DRIVE  
SUITE 800  
MIAMI FL 33133

Mailing Address

2665 SOUTH BAYSHORE DRIVE  
SUITE 800  
MIAMI FL 33133

3. Date Incorporated or Qualified

12/22/1986

3a. Date of Last Report

03/10/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KLEIN, PETER W.  
2665 SOUTH BAYSHORE DRIVE  
SUITE 800  
MIAMI FL 33133

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and their applicable)

(NOTE: Registered Agent signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DCPC ☐ DELETE

NAME POWELL, EARL W.  
STREET ADDRESS 2665 S BAYSHORE DR, SUITE 800  
CITY-STATE-ZIP MIAMI FL

TITLE D ☐ DELETE

NAME GEORGE, PHILLIP T.  
STREET ADDRESS 2665 S BAYSHORE DR, SUITE 800  
CITY-STATE-ZIP MIAMI FL 33133

TITLE VS ☐ DELETE

NAME KLEIN, PETER W.  
STREET ADDRESS 2665 S BAYSHORE DR, SUITE 800  
CITY-STATE-ZIP MIAMI FL 33133

TITLE VPTC ☒ DELETE

NAME VANDENBERG, PETER  
STREET ADDRESS 1373 BROAD ST 3RD FLR  
CITY-STATE-ZIP CLIFTON NJ

TITLE AS ☐ DELETE

NAME KUFFNER, MARILYN C.  
STREET ADDRESS 2665 SOUTH BAYSHORE DR STE 800  
CITY-STATE-ZIP MIAMI FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-STATE-ZIP

D/P

Powell, Earl W.

2665 S. Bayshore Dr., Suite 800  
Miami, FL 33133

(Controller)

Ronald E. DiMaria  
U.S. Route 40 and Oak Rd.  
Buena, NJ 08310

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE:

M. D. Kuffner, Asst. Sec'y

4/8/96. 305/858-2200

Daytime Phone #

CR2E034 (12/95)