

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P32765** (0)

1. Corporation Name
BIOCHEMPRO CORP.



Principal Place of Business: **C/O J. L. HERNANDEZ TORANO, ESO. 730 NW 107 AVENUE, SUITE 308 MIAMI FL 33172**
Mailing Address: **C/O J. L. HERNANDEZ TORANO, ESO. 730 NW 107 AVENUE, SUITE 308 MIAMI FL 33172**

3. Date Incorporated or Qualified 02/12/1991	3a. Date of Last Report 02/14/1995
4. FEI Number 65-0253650	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21. 3625 N.W. 82ND AVENUE Suite, Apt. #, etc. 22. SUITE 311 City & State 23. Miami, Florida Zip 24. 33166	2a. Mailing Address 26. 3625 N.W. 82ND AVENUE Suite, Apt. #, etc. 27. SUITE 311 City & State 28. Miami, Florida Zip 29. 33166	Country 25. DADE	Country 30. DADE
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9. Name and Address of Current Registered Agent

**HERNANDEZ, JOSE
730 NW 107 AVENUE, SUITE 308
MIAMI FL 33172**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	3625 N.W. 82 AVENUE
83	SUITE 311
84 City	Miami
85	FL
Zip Code	33166

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 the date (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PS	<input type="checkbox"/> DELETE
NAME	HERNANDEZ, JOSE	
STREET ADDRESS	730 NW 107 AVENUE #308	
CITY-ST-ZIP	MIAMI FL	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	HERNANDEZ, JOSE	
STREET ADDRESS	730 NW 107 AVENUE #308	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3625 N.W. 82 AVENUE SUITE 311
1.4 CITY-ST-ZIP	MIAMI FLORIDA 33166
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	3625 N.W. 82 AVENUE SUITE 311
2.4 CITY-ST-ZIP	MIAMI FLORIDA 33166
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
4.1 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: **JOSE HERNANDEZ** 2/20/96 (305) 499-9774

CR2E034 (12/95)