SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	996	DIVISION OF	CORPORAT	IONS	-	
DOCUM 1. Corporation N	ENT # P9200	0014075 (5	)			
BIO-TEM						H BOHAL YORK BADIN BOHIN 1880). BIHI 1881
Principal Piace c	of Business	Mailing Address			-	II <b>deigi ildir orbit oblik 10001 b</b> iyi 1007
4000 HOOTH EI	ONIDA BIUD	1605 NORTH FLORIDA	RLVD			
1805 NORTH FL BRADENTON FL		BRADENTON FL 34207			O alfred	3a. Date of Last Report
					3. Date Incorporated or Qualified	04/14/1995
		2a. Mailing Address			<b>12/24/1992 4.</b> FEI Number	Applied For
. Principal Plac	ce of Business	<b>├</b>		65-0375076	Not Applicable	
Suite, Apt #,	elc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
1	. etc	27			Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
		28			Trust Fund Contribution	Added to Fees
Zip	Country	Ζιρ	Cour	ntry	8. This corporation has liability for	intang-ble tax under s 199 032.  Yes No
	25	29	30		Florida Statutes  10. Name and Address of New Re	
	9. Name and Address of Curre	ent Registered Agent		B1 Name	TO. Name and Addition	9
DAT	INVOE A					
RAZ, JOYCE A 1605 NORTH FLORIDA BLVD. BRADENTON FL 34207  82 Street 83				82 Street Add	lress (P.O. Box Number is Not Acceptat	ne)
				83		
						85 Zip Code
				84 City		FL 85 Zip Code
agent 1 an	o the provisions of Sections do you gistered agent or both, in the Sta n familiar with, and accept the obling state to the provision of the state of	igations of Section 607.0505.	, Florida Stati	by the corporat utes ad Agent signature requ	poration submits this statement for the plan's board of directors. I hereby acception's board of directors.	DATE
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	Change Addition
TIFLE	D	DELETE	111	ITLE		Change Accine
NAME	RAZ, STEVE		1 2 N	,AMÉ		
STREET ADDRESS	6944 COUNTRY CLUB DR.			TREET ADDRESS		
CITY-ST-ZiP	SARASOTA FL 34243			CITY - ST - ZIP		Change Addition
TITLE	DV	DELETE	- 1			
NAME	RAZ, JOYCE A			VAME		
STREET ADDRESS	6944 COUNTRY CLUB DR.	•		STREET ADORESS		
CHY-ST-ZIP	SARASOTA FL 34243			CITY - ST - ZIP		Change Addition
TITLE		DELETE	li li	HTLE NAME		
NAME						
STREET ADDRESS				STREET ADDRESS CITY - ST - ZIP		
CITY-ST-ZIP		DELETE		TITLE		Change Additi
TITLE				NAME		
NAME				STREET ADDRESS		
STREET ADDRESS			1	CITY - ST - ZIP		
CATY - ST - ZIP		DELET		TIPLE		Change Additi
TITLE		<b></b>		NAME		
NAME OTOGET ADODESS			53	STREET ADDRESS		
STREET ADDRESS			5.4	CITY-ST-ZIP		
CiTY-ST-ZIP		DELET		TITLE		Change Addition

14. It do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, our an attachment with an address

SIGNATURE

SIGNATURE

On Type Or Printed NAME OF HERITARY OF FIGURE OR DIRECTOR

6.2 NAME

6.3 STREET ADDRESS

THLE

NAME

STREET ADDRESS