

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

FILED

Feb 05 1996 8:00 am
Secretary of State

DOCUMENT # **P93000021046 (6)**

1. Corporation Name

BIOTECH DISPOSAL, INC.

Principal Place of Business

**P. O. BOX 8661
DEERFIELD BEACH FL 33443
US**

Mailing Address

**P. O. BOX 8661
DEERFIELD BEACH FL 33433
US**

3. Date Incorporated or Qualified
03/10/1993

3a. Date of Last Report
03/28/1995

2. Principal Place of Business

2a. Mailing Address

21 **8676 GRIFFIN ROAD**

26 **SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **COOPER CITY, FL**

27 City & State

23 **33328 US**

28 City & State

24 Zip

29 Zip

25 Country

30 Country

4. FEI Number
65-0393012

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DAMATO, JULIE
11830 SW 49 COURT
COOPER CITY FL 33330**

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 the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

D
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

2 1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

3 1 TITLE ☐ Change ☒ Addition

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

4 1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

5 1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

6 1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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:

Carmen E. Arnani
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-96 305-434-4605
Date Daytime Phone

CR2E034 (12/95)