FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 05 1998 8:00am

Secretary of State

DOCUMENT # P93000026543 (7)

VAXON INTERNATIONAL, INC.

Principal Place of Business Mading Address 2555 MICHGAN STREET 2555 MICHIGAN STREET W. MELBOURNE FL 32904 W. MELBOURNE FL 32904				HOLD DILE: DILLI DIBOT ILE IDDI	
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	SSFACE
				04/08/1993	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-3182086	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State				Fee Required
23	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip Country			8. This corporation owes or has paid the c	
24 25	29	30		Personal Property Tax due June 30.	Yes 🔀 No
9. Name and Address of Curren	Registered Agent			10. Name and Address of New Registere	d Agent
JACKSON, VAN R		81	1 Name		
2555 MICHIGAN STREET		82	2 Street Addr	ess (P.O. Box Number is Not Acceptable)	
W. MELBOURNE FL 32904		83	·		
		84	1 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statu	utes, the abov	ve-named corp		
11. Pursuant to the provisions of Sections 607 0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations of the control	of Florida. Such change was tions of, Section 607.0505, F	s authorized b Torida Statute	by the corporations:	ion's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE					
			gent signature requir	ed when reinstating) DATE	
12. OF ICERS AND	DELETE	13. 1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME JACKSON, VAN R		1.2 NAME	1		C cusulte C vanimum
STREET ADDRESS 2555 MICHIGAN STREET		1.2 10/000	·		
MI AMELDALIDADE EL AGOST		1.3 STREE	EL ADDRESS		
CITY-ST-ZIP W. MCLDOURNE FL 32894			ET ADDRESS ST-ZIP		
TITLE W. MELBUURNE FL 32904	DELETE	1.3 STREE 1.4 CITY- 2.1 TITLE	ST-ZIP		Change Addition
	DELETE	14 CITY-	SI-ZIP		☐ Change ☐ Addition
TITLE	DELETE	14 CITY- 23 TITLE 22 NAME	SI-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		14 CITY- 21 TITLE 22 NAME 23 STREE 2 4 CITY-	ST-ZIP T ADDRESS -ST-ZIP		
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Learne Strate Land Control of the composition of the receiver or trustee emporared 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 addition.