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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000037775 (2)

AG-BIO ENTERPRISES, INC.

						<u> </u>
Principal Place	of Business	Mailing Address			#867/108/	8) 11 6 9 194 11111 1891 1891 1891 1991 1991 1991
817 W. FAIRBAI ORLANDO FL 3		817 W. FAIRBANKS AVEN ORLANDO FL 32804-2044	B17 W. FAIRBANKS AVENUE			
				3	 Date Incorporated or Qualified 07/01/1993 	3a. Date of Last Report 02/27/1996
2. Principal Pl	ace of Business	2a. Mailing Address		7	4. FEI Number	Applied For
21		26			59-3184922	Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		[5. Certificate of Status Desired	\$8.75 Additional
22		City & State				Fee Required
City & State		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country			or intangible tax under s. 199.032,
24	25	29	30			Yes K No
	9. Name and Address of Curren	t Hegistereo Agent	81 N	lame 1. // 'L	0. Name and Address of New R	registered Agent
	TE, FRANCIS L			White	c, trances L	
	W. FAIRBANKS AVENUE		82 St	treet Address	P.O. Box Number is Not Accepta	able)
OHL	ANDO FL 32804		83			
			[84] C	City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statu	ites, the above-na	amed corporation's	tion submits this statement for the	purpose of changing its registered
agent. La	egistered agent, or both, in the state m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes.	3 CO(poranorra	S Dudie of empotors, Frierony acc	abt the abbounding as solvered
SIGNATURE		· · · · · · · · · · · · · · · · · · ·	····		· · · · · · · · · · · · · · · · · · ·	
12.	Signaturi, Typed or proded name of registered age OFFICERS ANI		TE: Registered Agent signal	gnature required wh		DATE FICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/OFFAIGLS TO OFF	Change Addition
NAME	WHITE, ALBERT C		1.2 NAME			
STREET ADDRESS	817 W. FAIRBANKS AVENUE		1,3 STREET ADD	DRESS		
CITY-ST-7IP	ORLANDO FL		1.4 CITY - ST - ZI	1		
TrTLE	VST	DELETE	2.1 TITLE			Change Addition
NAME	WHITE, FRANCIS L		2.2 NAME	WAH	e Francis L	
STREET ADDRESS	817 W. FAIRBANKS AVENUE		2.3 STREET ADD		- , , , , , , , , , , , , , , , , , , ,	
CITY+ST-ZIP	ORLANDO FL		2. 4 CITY-ST-Z)P		
TRILE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADD			
CITY - ST - ZIP		DELETE	3.4 CITY-ST-Z	<u> </u>		Change Addition
TITLE NAME		had believe				tand Ottorigo tand Charles
NAME Street Address			4 2 NAME 4.3 STREET ADD	notes		
CITY-ST-ZIP			4.4 CITY-ST-ZI	l l		}
TITLE		☐ DELETE	5.1 TITLE	<u> </u>		Change Addition
NAME		_	5.2 NAME			·····
STREET ADDRESS			5.3 STREET ADD	ORESS		
CITY-ST-ZIP			5.4 CITY - ST - ZI	1		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			62 NAME	F		
STREET ADDRESS			6.3 STREET ADD	DRESS		
CITY-ST-ZIP			6.4 CITY - \$7 - ZI			
14. Fdo heret	by certify that the information supplies indicated on this appual report or s	d with this filing does not qual	lify for the exemp	ition stated in S	Section 119.07(3)(i), Florida Statu csignature shall have the same le	utes. I further certify that the gal effect as if made under oath; that
Lam an o	fficer or director of the corporation or n Block 12 or Block 13 if changed, o	the receiver or trustee empor	wered to execute	this report as	required by Chapter 607, Florida	Statutes; and that my name