

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

FILED
May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000043585 (7)

1. Corporation Name

SUNCOAST LABORATORIES, INC.

Principal Place of Business

2525 DAVIE RD.
SUITE 330
DAVIE FL 33317

Mailing Address

2525 DAVIE RD.
SUITE 330
DAVIE FL 33317

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/21/1993

4. FEI Number

65-0423082

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 owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 1301 SAWGRASS CORP PKWY

26 1301 SAWGRASS CORP PKWY

Suite, Apt. #, etc

Suite, Apt. #, etc.

22

27

City & State

City & State

23 SUNRISE FL

28 SUNRISE FL

Zip

Zip

Country

Country

24 33323

25 BROWARD

29 33323

30 BROWARD

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSEN, LAWRENCE N
133 SEVILLA AVENUE
CORAL GABLES FL 33134

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

PD
MINSKI, MEYER
2525 DAVE ROAD SUITE 330
DAVIE FL

TITLE

VDS
MINSKI, JOSE
2525 DAVE ROAD SUITE 330
DAVIE FL

TITLE

VD
WHITE, ROBERT
2525 DAVE RD., SUITE 330
DAVIE FL

TITLE

VD
MINSKI, RUBEN
2525 DAVE RD., SUITE 330
DAVIE FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

PD
MINSKI, MEYER
1301 SAWGRASS CORP PKWY
SUNRISE FL 33323

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

VDS
MINSKI, JOSE
1301 SAWGRASS CORP PKWY
SUNRISE FL 33323

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

VD
WHITE, ROBERT
1301 SAWGRASS CORP PKWY
SUNRISE FL 33323

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

VD
MINSKI, RUBEN
1301 SAWGRASS CORP PKWY
SUNRISE FL 33323

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

4/22/98

CR2E034 (10/97)