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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DOCUMENT # **P93000046324** (8)

THE BIOELECTRIC BODY INC.

Principal Place of Business 170 BAYSHORE DRIVE MELBOURNE BCH. FL 32951

US

Mailing Address

170 BAYSHORE DRIVE MELBOURNE BCH. FL 32951-3950

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 23 1997 8:00am Secretary of State



					3. Date incorporated or Qualified 34. Date of Last Report 06/24/1993 03/18/1996			
2. Principa P	Prace of Business	2a. Mailing Address	^		4. FEI Number	Apr	plied For	
21874	EauGaille Blud	26 874 EAU	1986	e Blud	<u> </u>		Applicable	
Suite Apt	*, etc KE	Suite, Apt. #, etc.	<u>.</u>		5. Certificate of Status Desired	□ \$8.75 A Fee Red		
City & Stat	te .	City & State		~ 1 ^	6. Election Campaign Financing	\$5.00 i		
23 NE	ibourne. FLA	28 Melboury	<u>16</u>	FLA	Trust Fund Contribution	Added to	> Fees	
2000	Country	Zφ 20025	Count	ry C A	8. This corporation has liability for		199.032,	
24 32935 25 VSA 29 32935 30 9. Name and Address of Current Registered Agent				SA	Florida Statutes Yes No 10. Name and Address of New Registered Agent			
					IV. Name and Address of New Poglatored Agent			
	K, LINNETTE		Ľ					
170 BAYSHORE DRIVE MELBOURNE BCH. FL 32951				82 Street Address (P.O. Box Number is Not Acceptable)				
				3				
			8	4 City		FL 85 Zip C	>ode	
11 Pureusot	to the provisions of Sections 607 0502	and 607 1508. Florida Statute	es the abo	ve-named corr	poration submits this statement for the		registered	
office or i	to the provisions of Sections 607 0502 registered agent, or both, in the State of am familiar with, and accept the obligati	Florida. Such change was a	uthorized	by the corporal	tion's board of directors. I hereby acce	ept the appointment as r	registered	
1	эт татшаг with, and accept the obligati	ons of, Section 607.0505, Fib	rida Statut	es				
SIGNATURE	Signature 145.00 or protect name of requiremental sect	and bite if applicable (NOTE	Braisteren A	gent signature requi	ired when reinstating)	DATE		
12.	OFFICERS AND		13.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTOR	S IN 12	
TITLE	D	DELETE	1,1 \$171.5			Change	☐ Addition	
NAME	BECK, LINNETTE		1.2 NAM	E				
STREET ADDRESS	170 BAYSHORE DRIVE		1.3 STRE	ET ADDRESS			,	
City ST-ZIP	MELBOURNE BCH. FL		1.4 CITY	-ST-7/P		·		
TELE	D	☐ DELETE	2 1 TITLI			☐ Change	Addition	
NAME	BECK, BRIAN		22 NAM	E				
STREET ADORESS	170 BAYSHORE DRIVE		2 3 STRE	ET ADDRESS		:		
CITY - ST-ZIP	MELBOURNE BCH. FL		2.4 CITY	(-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAM	E	•			
STREET ADDRESS	}		3.3 STRE	ET ADDRESS		•		
CITY- ST-20P				/-ST-ZIP	. ;			
THEF		☐ DELETE	4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAA	AE .		*		
STREET ADDRESS			4 3 STR	ET ADDRESS		•		
CITY-ST-7/P			_	-ST-ZIP				
TITLE		☐ DELETE	51 TITL			Change	Addition	
NAME			52 NAM	i				
STREET ADDRESS				EET ADDRESS				
CITY - ST - 7/F		- I becase		-ST-ZIP		110	A data:	
TITLE		☐ DELETE	6.1 TITE	•	. 4	☐ Change	Addition	
NAME	1		62 NAM	į į				
STREET ADDRESS				EET ADDRESS	· ·	ı		
City - ST - ZIP		•	64 CITY	'- ST- ZIP				

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

113197

407-259-9090

Daytime Phone #

32F034 (9/9