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Jun 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000046617 (5)

1. Corporation Name
BIO-AG, INC.



Principal Place of Business

1040 SUNSET
LAKE WALES FL 33853
US

Mailing Address

1040 SUNSET
LAKE WALES FL 33853-4247
US

2. Principal Place of Business

21 B2075 TURKEY CREEK

2a. Mailing Address

26 4033 GRAND AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 ROAD.

27

23 PLANT CITY, FL.

28 WESTERN SPRINGS, IL.

Zip

Country

24 33561

25 U.S.A.

Zip

Country

29 60558

30 600 U.S.A.

9. Name and Address of Current Registered Agent

KRAMER, HAROLD
1039 CAMPBELL AVE
LAKE WALES FL 33853

10. Name and Address of New Registered Agent

81 Name ERVIN JOHNSON
82 Street Address (P.O. Box Number is Not Acceptable)
83 0207 S. TURKEY CREEK RD
84 City PLANT CITY, FL 85 Zip Code 33567

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 Ervin Johnson ERVIN JOHNSON

DATE 6/10/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DP
NAME GALLMAN, RONALD L
STREET ADDRESS 1040 SUNSET
CITY-ST-ZIP LAKE WALES FL
☐ DELETE

TITLE VD
NAME MILLER, FREDDIE N
STREET ADDRESS 109 LYNTON RD
CITY-ST-ZIP JESUP GA
☐ DELETE

TITLE STD
NAME KRAMER, HAROLD A
STREET ADDRESS 1040 SUNSET
CITY-ST-ZIP LAKE WALES FL
☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPST
1.2 NAME RONALD L. GALLMAN
1.3 STREET ADDRESS 1040 SUNSET
1.4 CITY-ST-ZIP LAKE WALES FL
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

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 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

CR2E034 (9/96)