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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P94000010740 (6)

TREND PHARMACEUTICALS INC.

- 1	! Place of Busi	ness	
215 MOI	Intain drive		

## **FILED** Apr 23 1997 8:00am Secretary of State



Principal Place of Business 215 MOUNTAIN DRIVE SUITE 107 DESTIN FL 32541 US				ailing Address			4 samtiabr nie seine miete dente enter abstr natur fint dente sedet bible mater				
				215 MOUNTAIN DRIVE SUITE 107							
			DESTIN FL 32541-2346								
			U	US			3. Date incorporated or Qualified 02/09/1994 3a. Date of Last Report 05/17/1996			eport	
2. Principal Pi 21 745	Hollyu	used Blud	NW 26	Mailing Address 745 Holls	jubsol i	Blud NO	4. FEI Number 59-3228685			oplied For of Applicable	
Surte, Apt			27	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re		
City & Clare	laran	Beach	FL 28	City & State  Fr Walras	Bear	h. FL	Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	May Be to Fees	
Zφ 24 <b>325</b>	10	Country 25	29	3254B	Couni		8. This corporation has liability for Florida Statutes	intangible t		. 199.032,	
	•	and Address of C				***************************************	10. Name and Address of New R				
OSB	ORNE, RO	BERT P			- E	1 Name			JANUAR		
			Holly	wood Blu Beach, F	d NW	2 Street Add	dress (P.O. Box Number is Not Accepta	ible)	<del>,,,,,</del>	,	
-DES	TIN FL 325			Beach, F	7	3					
		32542			1	14 City		FL		Code	
11. Pursuanti	to the provis	ons of Sections 60	7.0502 and 6	07.1508, Florida Sta	tutes, the abo	ve-named co	rporation submits this statement for the ation's board of directors. I hereby according	purpose of	changing it	s registered	
agent La	egisteran ag 'n lamiliar wi	th, and accept the	office there c	da. Such change wa if, Section 607.0505,	is authorized Florida Statu	toy the corpora les.	anon's board of directors. Thereby acci	spi ine appo	illiment as	registered	
SIGNATURE		60 Paul	44	PIES				4//	1/97		
	Sport god		ned agent and title	elfanbleable (N	IOTE: Flagistered /	gent signature req	uired when reinstaling)	DATE	7		
12.		OFFICER	S AND DIRE		13.		ADDITIONS/CHANGES TO OFF		***************************************		
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NAME		E, ROBERT P			1.2 NAM	E		01.1			
STREET ANDRESS		T CLUB DR., #9			1 3 STR	ET ADDRESS 7	45 Hollywood Ft Walton Beach	BIVO	NW	<u>'</u>	
CHY-SLZP		alton beach f	L		1.4 City	-ST-ZiP	ft Walton Beach	FI 3	254	8	
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City - ST- 201	FT. WALT	TON BEACH FL			2. 4 CIT	r - ST - ZIP					
100	,			DELETE	3.1 101				Change	Addition	
NAME					3.2 NAN	IE					
STREE: ADDRESS					3.3 STR	ET ADDRESS					
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0174-\$1-719 Title				DELETE	61 TH	r-ST-ZIP			Change	☐ Addition	
TIPLE				F-J DECEIL		ļ			Orange		
NAMI					6.2 NAM						
STREET ADDRESS					. I	EET ADDRESS					
CITY-ST ZIF	l				6.4 CIT	r-ST-ZIP					

14. Ido 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 change of or an attachment with an address.

SIGNATURE:

TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR