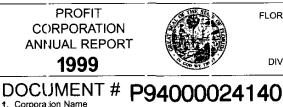
PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90087 028 ***150.00

Malling Address #14 POMPAND BEACH FL 3002 2. Principal Place of Business 2a Majling Address 2a Majling Addres	JAZOR LABORATORY GHOUP, INC.					
POWPAND BEACH FL 3002 Principa Place of Business 2a	Principal Place of Business	Mailing Address			, (81) W/WE! ITS!	· =· #11 8811 188)
Northwarter N 11-9 SPACE SACE SACE Sace Country S. Country	811 SE 22 AVENUE					
2. Principa Place of Business 2. April 1994 2. Principa Place of Business 2. Sulte, Ast. #, etc. 3. Sulte, Ast. #, etc. 4. Sulte, Ast. #,				DO NOT WRITE IN THE	S SPACE	
2. Principe Place of Business 2. A Malling Address 2. Pr. D. BO:	POMPANO BEACH PL 30002	03				
Sulfe, A.Z. #, etc. Sulfe, A.Z. #, etc.				03/29/1994		
Solition April 20 27 5, Certificitie of Stotus Desired 58,75 A Additional Fee Rectured 27 5, Certificitie of Stotus Desired 5, Certificitie of Stotus	2. Principa Place of Business	2a. Mailing Address	21211	1 ***	A	priled For
City & State City & City & State City & C	21		266.7	65-0480459		
City & State 28	 1	⊢		5. Certifcate of Status Desired	,	
Zig	22					
Zip	_ '	\vdash i i i i i i \vdash i \vdash i i i i i \vdash i \vdash i i i i i i \vdash i i i i i i i i i i i i i i i i i i i	FL	11		
Person a Property Tax.		20 -	Country	 		
9. Name and Address of New Registered Agent JEZIOR, BRUCE 811 SE 22ND AVE #14 POMPANO BEACH FL 33062 84 City FL 85 Zip Code 11. Pursuint to the provisions of Sections 607.050; and 607.1508, Florida Stati. tes, the above-named corporation submits this statement for the purpose of changing its registered agent. I amendment of state of Florida. Such changes as submitzed by the corporation submits this statement for the purpose of changing its registered agent. I amendment as registered agent. I amendment and registered agent. I amendment as registered agent. I amendment and value rewarding agent. I amendment and registered agent. I amendment an		29 3 3468 30	US		_	□No
JEZIOR, BRUCE 811 SE 22ND AVE #14 POMPANO BEACH FL 33062 11. Pursuint to the provisions of Sirctions 607.0502 and 607.1508. Florida Stati, tes, the above-named corporation submins this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligation so of Section 607.0505. Florida Stati, tes, the above-named corporation submins this statement for the purpose of changing its registered agent, and accept the obligation so of Section 607.0505. Florida Statutes. SIGNATUFE DELETE		1 Registered Agent		10. Name and Address of New Registers	i Agent	
811 SE 22ND AVE #14 POMPANO BEACH FL 33062 11. Pursue in to the provisions of Sirections 607,0502 and 607,1508. Florida Stati tes, the Development of Circy in the State of Florida. Such change was authorized by the corporation's board of iffrectors. I hereby accept the application agent, are respirately agent, and a recept the obligations of, Section 607,0505, Florida Stati tes, the Development of Interctors. I hereby accept the application of changing its registered agent agent and the respirately agent and the respirately agent and the respirately agent and the respirately applications of the spirately agent and the respirately agent agent and the respirately agent and the respirately agent agent and the respirately agent agent and the respirately agent age	ICTION POLICE		81 Name			
#14 POMPANO BEACH FL 33062 Set			82 Street Addre	ess (P.O. Bo) Number is Not Acceptable)		
POMPANO BEACH FL 33062 84 City FL S Zip Code 11. Pursuit in the provisions of Scations 607 0502 and 607 1508. Florida Static tes, the above-named corporation submits this statement for the purpose of changing its egistered agent, or both, in the State of Florida. Static tes, the above-named corporation submits this statement for the purpose of changing its egistered agent or both, in the State of Florida. Static tes, the above-named corporation submits this statement for the purpose of changing its egistered agent of provided vision of provided by the corporation's board of directors. I hereby accept the approintment as registered agent agent in the representation of provided statement for the purpose of changing its egistered agent agent in the provided by the corporation's board of directors. I hereby accept the approintment as registered agent agent in the corporation's board of directors. I hereby accept the approintment as registered agent agent in the corporation's board of directors. I hereby accept the approintment as registered agent in the corporation's board of directors. I hereby accept the approintment as registered agent in the corporation's board of directors. I hereby accept the approintment as registered agent in the corporation's board of directors. I hereby accept the approintment as registered agent in the corporation's board of directors. I hereby accept the approintment as registered agent in the corporation's board of directors. I hereby accept the approintment as registered agent agent in the corporation's board of directors. I hereby accept the approintment as registered agent a						
11. Pursuant to the provisions of Sictions 607.0500; and 607.1508. Florida Stati. test, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approintment as registered agent, and admit with, and arcept the obligat ons of, Section 607.0505, Florida Stati. test, the above-named corporation submits this statement for the purpose of changing its registered agent, and admit approximate of the provisions of Section 607.0505, Florida Stati. test, and the provisions of Section 607.0505, Florida Stati. test agent agent, and admit approximate agent agent, and admit agent			83			1
11. Pursue in to the provisions of Scotlone 607 6507 and 607 1508. Findide Stati lies, the above-named c-roporation submits this statement for the purpose of changing its egistered office or registered agent, or other the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the approintment as registered office or registered agent, or other through the state of Florida Statutes. SIGNATUPE Signature, type due to printed range agent and filter approaches. INDE Registered Agent separation for invalvation of the state of the properties agent and filter approaches. INDE Registered Agent separation for invalvation from the state of the properties and state of the properties agent and filter approaches. INDE Registered Agent separation for invalvation from the state of the properties and s	TOM AND BEACHTE GOOD		84 City	E	85 Zip	Code
12.	office or registered agent, or both, in the State agent. I am amiliar with, and accept the obligation of the State agent. I am amiliar with a company of the state agent.	of Florida. Such change was authoritions of, Section 607,0505, Florida S	zed by the corporation statutes.	n's board of directors. Thereby accept the appli 4/23/99	of changing it ointment as r	s régistered egistered
TITLE					ND DIRECT	ORS IN 12
NAME STREET ADDRESS						
CITY_ST-ZIP POMPANO BEACH FL 33062		1.	2 NAME			
TITLE	STREET ADDRESS 811 SE 22ND AVE, #14	1.	3 STREET ADDRESS			
NAME	CITY-ST-ZIP POMPANO BEACH FL 33062		4 CITY-ST-ZIP			
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP Change Addition Change Addition Change Addition	TITLE	☐ ĐELETE 2	1 TITLE		Change	Addition
CITY-ST-ZIP	NAME	2	2 NAME			j
TITLE	STREET ADDRESS	. 2	3 STREET ADDRESS			
NAME 32 NAME 32 NAME 32 NAME 32 NAME 32 NAME 33 STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP					□ Change	- Addition
STREET ADDRISS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		· ·	1		□ Cilange	Addition
CITY-ST-ZIP			- 1			}
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME			1			[
NAME					Change	Addition
A3 STREET ADDRESS A4 CITY-ST-ZIP A4 CITY-ST-ZIP Change Addition		_				_
CITY-ST-ZIP 44 CITY-ST-ZIP TITLE S.1 TITLE NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE NAME 62 NAME						
TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE NAME 62 NAME						
NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CFTY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 62 NAME		· · · · · · ·				
STACITY-ST-ZIP		☐ DELETE 5.	.1 TITLE		☐ Change	☐ Addition
CFTY-ST-ZIP 54 CFTY-ST-ZIP TITLE 61 TITLE Change Addition NAME 62 NAME	STREET ADDRESS:				☐ Change	Addition
TITLE DELETE 61 TITLE Change Addition NAME CASTREY ADDITIES		5	2 NAME		☐ Change	Addition
CACTURES ADDITION		5.	2 NAME 3 STREET ADDRESS		☐ Change	Addition
STREET ADDRESS 6.3 STREET ADDRESS	TITLE	5 5 5	2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP			
		5 5 DELETE 6	2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE			

CITY-ST-ZIP 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 attactment with an address, with all other like empowered.

MAJORE AND TYPED OF PRINTED NAME OF SIGNING OFFICIR OR DIRECTOR SIGNATURE:

954-783-3443