

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
 Virginia B. Matheson
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P94000040702 (0)

MITCHELL B. KIRSCHNER, P.A.


$$s = \frac{1}{2} \left(1 + \frac{1}{\sqrt{1 + 4\alpha^2}} \right) \quad (1)$$

Figure 1. The effect of the concentration of the solution on the rate of the reaction.

301 YAMATO ROAD
SUITE 2110
BOCA RATON FL 33431

301 YAMATO ROAD
SUITE 2110
BOCA RATON FL 33431

2. *Chlorophyll a* and *Chlorophyll b* content.

2a. $\frac{1}{2} \times \frac{1}{2} = \frac{1}{4}$

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9. Name and Address of Current Registered Agent

KIRSCHNER, MITCHELL B
301 YAMATO ROAD
SUITE 2110
BOCA RATON FL 33431

81 | Page

82 Street Address, if () Box Number is Not Applicable

83

84 City

85 Zigg Code

11. I, the undersigned, president of the corporation, hereby certify that the above named corporation is duly organized and existing under the laws of the State of New York, and that the purpose of changing its registered office is to change its location in the State of New York. Such change was authorized by the corporation's board of directors, thereby to effect the appointment as registered agent, of the person named in the above certificate, as set forth in Article 6 of the corporation's Charter.

1. 1. 1. 1. 1.

[illegible]

[12]

12	CONFIDENTIAL DIRECTOR	13
	[] DELETED	11-11-81
	D	12-11-81
	KIRSCHNER, MITCHELL B	13-11-81
	11341 LAKE TREE COURT	14-11-81
	BOCA RATON FL 33498	15-11-81
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ **Check** ☐ **Change**

☐ Group ☐ Address☐ Change ☐ Add:☐ Copy ☐ Add new☐ Group ☐ Add a ...☐ Group ☐ Address

14 I hereby certify that the information given in this report is true and correct to the best of my knowledge and belief, and that the same does not qualify for the exemption stated in Section 119.07(3)(d), Florida Statutes. I further
15 certify that the information contained herein is confidential information reported in confidence and that my signature shall have the same legal effect as if made under
16 oath. I am hereby making this statement of responsibility in accordance with the provisions of the law authorized by Chapter 607, Florida Statutes, and that my name
17 will appear in the public records of the State of Florida.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-96 (467)998-3325

CR2E034 (12/95)