

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State
 04-23-2001 90148 019 ***150.00

DOCUMENT # P94000047807

1. Entity Name
BIOFORM INC.

Principal Place of Business
8 SHANNON CIRCLE
WEST PALM BEACH FL 33401

Mailing Address
8 SHANNON CIRCLE
WEST PALM BEACH FL 33401

2. Principal Place of Business
2299 TECUMSEH CIRCLE
 Suite, Apt. #, etc.

3. Mailing Address
5 AM E
 Suite, Apt. #, etc.

City & State
WEST PALM BEACH FL
 Zip
33409

City & State
F

4. FEI Number
65-0501332

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WARNER, STEPHEN J
8 SHANNON CIRCLE
WEST PALM BCH FL 33401

7. Name and Address of New Registered Agent

Name
WARNER, STEPHEN J
 Street Address (P.O. Box Number is Not Acceptable)
2299 TECUMSEH CIRCLE
 City
West Palm Beach FL Zip Code
33409

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **STEPHEN J. WARNER** DATE **4/15/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
DPS
 NAME
WARNER, STEPHEN J
 STREET ADDRESS
8 SHANNON CIRCLE
 CITY-ST-ZIP
WEST PALM BEACH FL 33401

TITLE
DT
 NAME
WARNER, LAURA M
 STREET ADDRESS
8 SHANNON CIRCLE
 CITY-ST-ZIP
W PALM BCH FL 33401

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
DPS
 NAME
WARNER, STEPHEN J
 STREET ADDRESS
2299 TECUMSEH CIRCLE
 CITY-ST-ZIP
WPD FL 33409

TITLE
DT
 NAME
WARNER, LAURA M
 STREET ADDRESS
2299 TECUMSEH CIRCLE
 CITY-ST-ZIP
WPD, FL 33409

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STEPHEN J. WARNER DATE **4/15/01** DAYTIME PHONE # **561-686-2900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)