FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 JUL 14 AM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000059979

1. Corporation Name
I.V. CONCEPT, INC.

Principal Place of Business / Mailing Address
5200 Town Center Circle
Suite 105
Boca Raton, Florida 33486

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 8-15-94
3a. Date of Last Report: N/A

2. Principal Place of Business
21 5400 S. University Drive
22 Suite, Apt. #, etc.: Suite 111
23 City & State: Davie, Florida
24 Zip: 33328
25 Country:

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: 65-0513624 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, Florida 32301

10. Name and Address of New Registered Agent

81 Name: Mitchell Green
82 Street Address (P.O. Box Number is Not Acceptable): 4000 Hollywood Blvd.
83 Suite 485 S.
84 City: Hollywood, FL 85 Zip Code: 33021

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: Mitchell Green — Mitchell Green — 6/1/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D	11 TITLE	P/D ☐ Change ☐ Addition
NAME	Kenneth Goss	12 NAME	Kenneth Goss
STREET ADDRESS	5200 Town Center Circle, Ste. 105	13 STREET ADDRESS	5400 S. University Drive, Ste. 111
CITY-ST-ZIP	Boca Raton, Florida 33486	14 CITY-ST-ZIP	Davie, Florida 33328
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	000001540160
STREET ADDRESS		33 STREET ADDRESS	-07/18/95--01079--016
CITY-ST-ZIP		34 CITY-ST-ZIP	****225.00 ****225.00
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	7-14-95 t.g.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 attachment with an address.

SIGNATURE: Kenneth M Goss — President — 6/1/95 — 305-434-9927
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #