

FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # P95000058536 (0)

'O' TEAM INTERNATIONAL, INCORPORATED

Principal Place of Business:

Materials and Methods

1800 HILL DRIVE
APOPKA FL 32703

1800 HILL DRIVE
APOPKA FL 32703-9304

2. Principal Place of Business.

2a. Meeting Address:

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
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22	City & State	27	City & State
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23	Zip	Country	28	Zip	Country
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9. Name and Address of Current Registered Agent

OSTERMEYER, DONALD C
1800 HILL DRIVE
APOPKA FL 32703

81 | Page

82 Street Address: (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607 (b)(2) and 607 (b)(3), 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. Thereby accept the appointment as registered agent I am familiar with, and accept the obligation of, Section 607 (b)(3), Florida Statutes.

SIGNATURE

[illegible]

Journal of the American Statistical Association

2411

OBJECTIVES AND DISCUSSION

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	PTSD	DATE	01/01/01
STREET ADDRESS	OSTERMEYER, DONALD C		
CITY - ST - ZIP	1800 HILL DRIVE		
	APOPKA FL 32703		

TITLE	DATE:
NAME	
STREET ADDRESS	
CITY - STATE - ZIP	

[illegible]

TITLE	☐ DATE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	DATE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

TITLE _____

NAME _____

STREET ADDRESS _____

CITY - ST - ZIP _____

11:00:00 ☐ Change ☐ Add on

12:00:00

13:59:59 11 April 2015

14:00:00 12 April 2015

21100	☐ Change	☐ Addition
22400		
23500:11 ADDRESS		
24000: SI 7F		

3.0.000 ☐ Change ☐ Addition

3.2.000

3.5.000 1/1/2008/23

3.4.01 $\times$ S^{2-} Zn^{2+}

40101 ☐ Change ☐ Addition
40200
40300
40400
40500

5.1 DEF ☐ Change ☐ Add or
 5.2 NAME
 5.3 SELECT ADDRESS
 5.4 GATEWAY ID

G11 III GZKCM G351814 ADDRESS GZKCM / #	☐ Change ☐ Addition
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information included on this annual report of support 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 officer or director designated to execute the report as required by Chapter 604, Florida Statutes, and that my name appears in Block 12 or Block 13 is being provided to you in accordance with my address: 10000 E. Green St.

BIONATLIFE

CR2E034 (9/96)