

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000073529 (6)

1. Corporation Name

LIFECELL TECHNOLOGIES INTERNATIONAL, INC.



Principal Place of Business

284 BAL BAY DRIVE SUITE 1A
BAL HARBOUR FL 33154

Mailing Address

284 BAL BAY DRIVE SUITE 1A
BAL HARBOUR FL 33154

2. Principal Place of Business

21 284 BAL BAY DRIVE

22 Suite, Apt. #, etc.
A-7

23 City & State
MIAMI FLORIDA

24 Zip
33154

25 County
DS

2a. Mailing Address

26 284 BAL BAY DRIVE

27 Suite, Apt. #, etc.
A-7

28 City & State
MIAMI, FLORIDA

29 Zip
33154

30 County
DS

3. Date Incorporated or Qualified

09/22/1995

3a. Date of Last Report

4. FEI Number

65-0609143

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

10. Name and Address of New Registered Agent

81 Name

JEAN BERRY

82 Street Address

284 BAL BAY DR. 1A

83 City

BAL HARBOUR

84 State

FL

85 Zip Code

33154

11. Pursuant to the provisions of Sections 607.011(2) and 607.011(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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed, printed, or otherwise made known to the State

Signature typed, printed, or otherwise made known to the State

Date: 5/1/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
BERRY, JEAN
STREET ADDRESS
284 BAL BAY DRIVE SUITE 1A
CITY-STATE-ZIP
BAL HARBOUR FL 33154

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
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CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

15 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

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