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**PROFIT** CORPORATION ANNUAL REPORT



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

**DOCUMENT #** 

1996

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GENE	ISIS ONE, INC.							1 40 0 10 0 0 10 10 10 10 10 10 10 10 10 10	8(3) <b>88</b> () <b>88</b> ()	A E I BLAN AIGH AN	
Principal Place	of Business	 Ma	iling Address					E IRBUNDO HA IBIRI DIGU DANA D	Olli Moist Mas	#1 1 <b>3100</b> 11311 <b>9</b> 0	illi 18918 1911 1881
311 ALTAMONTE BAY CLUB #108			311 ALTAMONTE BAY CLUB #108								
	E SPRINGS FL 32701		ALTAMONTE SPRING	S FL 3270	İ						
								3. Date Incorporated or Qualified 10/26/1995	<b>3a</b> . Da	ate of Last R	eport
2. Principal Pla	ace of Business	2a.	Mailing Address					4. FEI Number			Applied For
21		26						59-3345912	_		Not Applicable Additional
Suite, Apt. :	#, etc.	27	Suite, Apt. #, etc.					5. Certificate of Status Desired			Required
City & State		- 27	City & State					6. Election Campaign Financing		\$5.0	0 May Be
23		28	-					Trust Fund Contribution		Adde	d to Fees
Zip	Country		Zip	Cou	intry			B. This corporation has liability fo		tax under s	199.032,
24	25	29	land Apont	30	1			Florida Statutes Ye  10. Name and Address of New	s ∏No Registere	d Agent	
	9. Name and Address of Curre	nt Hegisi	iered Agent		81	Name		IU. Name and Address of New	i i ogistoro	o rigoni	
DUDIN	OTENUEM .							(DO FILM )	<u></u>		
DUBIN, STEPHEN 311 ALTAMONTE BAY CLUB #108					82 Street Add		Address	ress (P.O. Box Number is Not Acceptable)			
	IONTE SPRINGS FL 32701				83						
,,,,,,,,,,					84	City				<b>85</b> Zi	p Code
		_				,			F	ᄔᆝᆝ	
or roa ator	to the provisions of Sections 607.050 ed agent, or both, in the State of Flor	ida Such	i chande was a∷ithoriz	ran av tne d	ove-n corps	named co oration's	orporatio board c	in submits this statement for the p if directors. I hereby accept the ap	urpose of a pointment (	changing its i as registered	registered οπίσε Lagent, Lam
familiar wil	th, and accept the obligations of, Sec	tion 607.	0505, Florida Statutes	S.							ļ
SIGNATURE	Signature, typed or printed name of registered ager	Londitik if s	nocicario (NC	OTE: Riegistered	LAgen	d saneture re	egured wh	en ranstulnai	DATE		
12.	OFFICERS AN			13.				ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTO	DRS IN 12
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				1.2 N	AMF	ADORESS	PRE	81 <b>86</b> N 1		<b>₩</b> Uhange	Addition
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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)(k). 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 call; 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 aodress.

SIGNATURE: States E. Daki Resident STEPHEN E. DUBIN 3/29/96 (407) P84-P189

Day Day OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)