

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000094626 (5)

1. Corporation Name

DERMA-TEK INDUSTRIES, INC.



Principal Place of Business

Mailing Address

1532 US HIGHWAY 41 BY PASS S
SUITE 258
VENICE FL 34293

1532 US HIGHWAY 41 BY PASS S
SUITE 258
VENICE FL 34293

2. Principal Place of Business

2a. Mailing Address

21 340 CENTER CT
Suite, Apt #, etc.

26 340 CENTER CT
Suite, Apt #, etc.

22 City & State

27 City & State

23 VENICE, FL
Zip Country

28 VENICE, FL
Zip Country

24 34292 25 USA

29 34292 30 USA

9. Name and Address of Current Registered Agent

MARCUM, H D
1532 US HIGHWAY 41 BY PASS S
SUITE 258
VENICE FL 34293

3. Date Incorporated or Qualified

3a. Date of Last Report

12/11/1995

N/A

4. FEI Number

65-062 3809

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

10. Name and Address of New Registered Agent

81 Name

MARCUM, H.D.

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

340 CENTER CT.

83

84 City

VENICE

FL

85 Zip Code

34292

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

H.D. Marcum

H.D. MARCUM

JUNE 17, 1996

Signature typed or printed in block of registered agent and for applicable fee

(Print) Registered Agent Signature required when reinstating

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DPT
MARCUM, H D
222 MARTINIQUE
NORTH PORT FL 34287

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DVS
DYE, KENNETH R
1064 HOPE ST
VENICE FL 34292

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP

61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

71 TITLE 72 NAME 73 STREET ADDRESS 74 CITY-ST-ZIP

81 TITLE 82 NAME 83 STREET ADDRESS 84 CITY-ST-ZIP

91 TITLE 92 NAME 93 STREET ADDRESS 94 CITY-ST-ZIP

101 TITLE 102 NAME 103 STREET ADDRESS 104 CITY-ST-ZIP

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341 TITLE 342 NAME 343 STREET ADDRESS 344 CITY-ST-ZIP

351 TITLE 352 NAME 353 STREET ADDRESS 354 CITY-ST-ZIP

361 TITLE 362 NAME 363 STREET ADDRESS 364 CITY-ST-ZIP

SIGNATURE:

H.D. Marcum

H.D. MARCUM

6/24/96 941 492-6966

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President