

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

pg. 10f 2

PROFIT
CORPORATION
ANNUAL REPORT



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

FILED

97 MAY 20 PM 4:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PA50000096679**
1. Corporation Name
Florida micro culture Corporation

Principal Place of Business

Mailing Address

2. Principal Place of Business

21. **1900 WASHBURN AVE**

2a. Mailing Address

27. **4543 GENOA AVE**

State, Apt., etc.

Suite, Apt. #, etc.

22. City & State

23. **Naples, FLORIDA**

Zip

34106

Country

USA

27. City & State

28. **Naples, FLORIDA**

Zip

34103

Country

USA

3. Date Incorporated or Qualified

December 22, 1995

3a. Date of Last Report

N/A

4. FEI Number

65-0632115

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

DAVID D. SLOCUM

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

4543 GENOA AVE

83. City

Naples

FL

85. Zip Code

34103

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 **David D. Slocum** **DAVID D. SLOCUM, President**

4-26-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ DELETE

1.2 NAME **DAVID G. CARTER**
1.3 STREET ADDRESS **243 WILLOWICK DRIVE**
1.4 CITY-ST-ZIP **NAPLES, FLORIDA 33942**

2.1 TITLE ☐ DELETE

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ DELETE

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ DELETE

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ DELETE

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ DELETE

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information stated 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. I checked one or more attachment with an address.

SIGNATURE: **David D. Slocum** **DAVID D. SLOCUM** **4-26-97** **941-263-6148**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

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FLORIDA MICRO CULTURE CORPORATION
PS95000096679
4543 GENOA AVE.
NAPLES, FLORIDA 34103

26 APRIL 1997

FLORIDA DEPARTMENT OF STATE
ANNUAL REPORTS FILINGS
DIVISION OF CORPORATIONS
P.O BOX 6327
409 EAST GAINES STREET
TALLAHASSEE, FLORIDA 32399

DEAR SIRs, MADAMES;

AFTER A CALL TO YOUR OFFICE (SPOKE WITH TREVA BRUMBLEY) TO FIND OUT WHEN WE WOULD RECEIVE OUR PACKET FOR THE CORPORATE PROFIT A/R, I WAS INFORMED THAT WE HAD OUR CORPORATION STATUS ADMINISTRATIVELY DISSOLVED.. WE DID NOT WANT THIS TO HAPPEN! WE ARE A NEW CORPORATION AND WITH ALL OF THE START UP CONFUSION WE MISTAKENLY FAILED TO FILE WHEN DUE..WE NEVER DID RECEIVE OUR PACKET AS I WAS TOLD WE WOULD TO FILE THE ANNUAL REPORT...

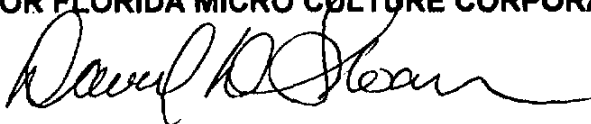
UPON THE ADVICE OF TREVA BRUMBLEY, I AM VERY HUMBLy ASKING YOU TO WAIVE OUR REINSTATEMENT FEE THIS TIME..WE (AS ARE PROBABLY MOST START UP BUSINESSES) ARE IN A TIGHT MONEY SQUEEZE AND THE EXTRA FEE WILL ADVERSLY IMPACT OUR FINANCIAL SITUATION.

PLEASE EXCEPT OUR CHECK FOR \$365.00, WITH OUR APOLOGY AND OUR PROMISE THAT THIS WILL NEVER HAPPEN AGAIN..

+ \$8.75 for Certificate
of Status. TOTAL = 373.75

THANK YOU IN ADVANCE FOR YOUR CONSIDERATION AND PATIENCE..

FOR FLORIDA MICRO CULTURE CORPORATION;



DAVID D. SLOCUM, PRESIDENT