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

Mailing Address 7541 SAN CARLOS BLVD

FT MYERS FL 33912-3648

2a. Mailing Address

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthari -

DIVISION OF CORPORATIONS · 1997

DOCUMENT # P96000017619 (3) BIO GENESIS U.S.A., INC.

Principal Place of Business

2. Principal Place of Business

7541 SAN CARLOS BLVD FT MYERS FL 33912

4. FEI Number 65-0 645230 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MILLIKEN, MARK 7541 SAN CARLOS BLVD Streel Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33912 83 84 85 Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. VSD DELETE Change TITLE 11 TITLE MILLIKEN, MARK 1.2 NAME NAME 7541 SAN CARLOS BLVD STREET ADDRESS 1.3 STREET ADDRESS FT MYERS FL 33912 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Change TITLE MILLIKEN, SALLY NAME 2.2 NAME 7541 SAN CARLOS BLVD STRUET ADDRESS 2.3 STREET ADDRESS

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6.4 CITY-ST-ZIP 14. I do nereby 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 indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 if changes or on an attachment with an address.

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4.3 STREET ADDRESS

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5.4 City-ST-ZiP

6.3 STREET ADDRESS

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6.1 TITLE

6.2 NAME

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FT MYERS FL 33912

FILED

May 12 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

(96/6)

CR2E034

Addition

Addition

Addition

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Change Addition

Change

Change

3. Date Incorporated or Qualified

02/23/1996

0400038

Change Addition