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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000039691 (6)

FILED Apr 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 7040 W PALMETTO PARK RD SUITE 4-277 7040 W PALMETTO PARK RD S BOCA RATON FL 33433 BOCA RATON FL 33433						.,	DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified 05/08/1996				
_	lace of Business	2a. Mailing	Address				4. FEI Number			plied For	4
Suite, Apt.	# ata	26 Suito A	Suite, Apt. #, etc.				65-0667598		-	: Applicable .dditional	4
22	π, οισ.	— ·	27				5. Certificate of Status Desired		Fee Red		
City & State	9		City & State				6. Election Campaign Financing	\$	5.00	May Be	٦
23		28					Trust Fund Contribution		Added to		↲
Zip	Country				untry 8. This corporation owes or has paid the current year Intangit						1
24	25 9. Name and Address of Currer	29	3	0			Personal Property Tax due June 10. Name and Address of New Re			No	┨
011		iit uofisioien vi	OIII.	81	Name		10, reality and reduces of from the	-Biotolog Man			┪
	el do n, howard 10 w palmetto park RD suit	E 4.977			01-1-1	A -1 -1	/O.O. Barris Marker in Net Accordal	-1-)			┦
BOCA RATON FL 33433				62	62 Street Address (P.O. Box Number is Not Acceptable)						╛
				63							7
				84	City			— 85	Zip C	Code	1
44 6	to the manufactors of Continue CO7 OF	22 and 607 1609	Elorida Ctatudos	the phon	n namor	d corpor	ation cultimite this statement for the	FL O	noing its	registered	4
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such	change was au	thorized b	y the cor	rporation	n's board of directors. I hereby accep	pt the appointm	ent as r	egistered	1
	m tamiliar with, and accept the oblig	ations of Section	007.0303, FIGH	ua Statule	5.						
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable	(NOTÉ: I	Registered Ag	ent signatur	e required	when reinstating)	DATE			_ 6
12.		ID DIRECTORS	T DELETE	13.			ADDITIONS/CHANGES TO OFFIC		ECTORS	S IN 12	18
TITLE	D DELETE			1.1 TITLE 1.2 NAME				ш,	mange	☐ Kudilidii	;
NAME Street address	SHELDON, HOWARD 7040 W PALMETTO PARK RD SUITE 4-277			1.2 NAME 1.3 STREET ADDRESS							8
CRY-ST-ZIP	5004 DATON FL 50400				1.4 CITY-ST-ZIP						
TITLE			DELETE	2.1 TITLE		· · · · ·			Change	Addition	া
NAME				2.2 NAME							
STREET ADDRESS				2.3 STREE	i address						1
CITY-ST-ZIP		·	DELETE	2. 4 CITY-	ST - ZIP	<u> </u>			Change	Addition	4
TITLE		L		3.1 TITLE 3.2 NAME				LJ '	nange	L. Addition	1
NAME Street address					ADDRESS						
CITY-ST-ZIP				3.4. CITY-							-
TITLE			DELETE	4.1 TITLE					hange	Addition	1
NAME				4. 2 NAME							1
STREET ADDRESS				4.3 STREE	ADDRESS						1
CITY-ST-ZIP			COLLETE	4.4 CITY-1	ST - ZIP	ļ		П	hange	☐ Addition	-
TITLE		L	DELETE	5.1 TITLE 5.2 NAME				, n	manye	L. AGGIRON	
NAME Street address					T ADDRESS						
CITY-ST-ZIP				5.4 CITY-							
TITLE			DELETE	6.1 TITLE					Change	Addition Addition	1
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREE	address						
CITY-ST-ZIP	south, that the information cumuliad w	with this files door	not qualify for	6.4 CITY-1		lod in Sc	action 119.07/3Vi) Florida Statutas I	further certify	hat the	information	\dashv

thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that intelligible 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 oath; that I am 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 address.