PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000002833

1. Corporation Name

BIONET INTERNATIONAL, INC.

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90140 044 ***158.75



Principal Place of Business Mailing Address									#### ### ###	11/88 (11/1 188)
5785 DEVONSHIRE BLVD 5785 DEVONSHIRE BLVD							· ·			
MIAMI FL 33155		MIAMI FL 33155				DO NOT WRITE IN THIS SPACE				
						3.	. Date Incorporated or Qualife	d		
	•						01/10/1997			
2. Principal Pl	ace of Business	2a. Mailing Address				4.	. FEI Number		Apr	lied For
21		26				Ì	APPLIED FOR		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					. Certifcate of Status Desired		\$8.75 A	
22		27					. Certificate of Status Desired	<u>.</u>	Fee Rec	uired
City & State	•	City & State				6	. Election Campaign Financing	9 🗆	\$5.00	May Be
23		28	_				Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Coun	itry		8.	. This corporation owes the cu	ırrent year In		_ 1
24	25	29 3	0				Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent		- 1		10	. Name and Address of New	Registered	Agent	
DOD	RIGUEZ, EDUARDO			81	Name				•	
		- h	82 Street Address (P			P.O. Box Number is Not Accep	otable)			
5785 DEVONSHIRE BLVD			Ĺ							
MIAMI FL 33155			•	83						ļ
				84	City				85 Zip C	ode
	•		1	- 1	, ,			FL	-	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auth	horized	by :	the corporati	oratio on's b	on submits this statement for the located of directors. I hereby account	e purpose of ept the appo	l changing its r intment as reg	egistered istered
SIGNATURE		more b					instation	DATE		-)
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg. 12. OFFICERS AND DIRECTORS					ered Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					RS IN 12
TITLE	D OFFICERS ANI	DELETE 1.1					ADDITIONOLO INCIDED TO C	AT TOLITOTAL	Change	Addition
NAME	RODRIGUEZ, EDUARDO			2 NAME						_
	5785 DEVONSHIRE BLVD				ADDRESS			,		{
STREET ADDRESS	MIAMI FL 33155			1.4 CITY-ST-ZIP						1
CITY-ST-ZIP TITLE	D DELETE		_	2.1 TITLE					Change	Addition
				2.2 NAME			•		_ ,	_
NAME	7431 SW 88TH PL			2.3 STREET ADDRESS						
STREET ADDRESS	MIAMI FL-33173						,			j
CITY-ST-ZIP				2.4 CITY-ST-ZIP ~			- 4		☐ Change	Addition
	# T		3.2 NAA						-	
NAME	•				ADORESS					
STREET ADDRESS	•				i					ļ
CITY-ST-ZIP		☐ DELETE	3.4, CIT 4.1 TITL	_	1-217				Change	Addition :
TITLE	<u>.</u>		4.1 IIII 4.2 NAJ					•		
NAME	•		1		ADDOCCO					
STREET ADDRESS			■ 4.5 STK	ree!	ADDRESS					;

CITY-ST-ZIP. 6.4 CITY-ST-ZIP 14. I hereby 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 supplied annual report is frue 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 empty whereas 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

□ DELETE

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Addition

Addition

Change

Change