

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000029401

1. Entity Name

BIO-TISSUE, INC.

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90033 011 ***150.00

Principal Place of Business

6601 SW 80TH ST
200B
S MIAMI FL 33143
US

Mailing Address

6601 SW 80TH ST
200B
S MIAMI FL 33143-4661
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0742529

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHIFFRIN, MICHAEL ESQ.
SUNTRUST INTERNATIONAL CENTRE
ONE SOUTHEAST THIRD AVENUE
MIAMI FL 33131

Name

AMY H TSENG

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

6601 SW 80TH STREET

City

SUITE 200B

S MIAMI

FL

Zip Code

33143

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DIRECTOR

(NOTE: Registered Agent signature required when reinstating)

3/23/2000
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS ROSENBAUM, JERRY MD
CITY-ST-ZIP 9400 SW 68TH CT
MIAMI FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME PD
STREET ADDRESS TSENG, AMY H
CITY-ST-ZIP 10000 SW 63 PL
MIAMI FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME DVP
STREET ADDRESS ROSENBAUM, BARBARA J
CITY-ST-ZIP 9400 SW 68TH CT
MIAMI FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SD
STREET ADDRESS MERRITT, JENIFER
CITY-ST-ZIP 12125 SW 110 ST CIRCLE SOUTH
MIAMI FL 33186

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

Date

3/23/2000

Daytime Phone #

CR2E034 (9/99)