

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000029401

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: BIO-TISSUE, INC.

**Current Principal Place of Business:**

7000 SW 97 AVE  
STE 211  
MIAMI, FL 33173 US

**New Principal Place of Business:**

**Current Mailing Address:**

7000 SW 97 AVE  
STE 211  
MIAMI, FL 33173 US

**New Mailing Address:**

FEI Number: 65-0742529      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TSENG, AMY H  
7000 SW 97 AVE  
STE 211  
S MIAMI, FL 33173 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: TSENG, AMY H CPA  
Address: 10000 SW 63 PL  
City-St-Zip: MIAMI, FL 33156

Title: S ( ) Delete  
Name: HSU, YILING  
Address: 13457 SW 59 AVE  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMY TSENG

PTD

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date