## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P97000029401

## FILED Jul 23, 2008 Secretary of State

Entity Na	me: BIO-TISS	JE, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7000 SW 97 AVE STE 211 MIAMI, FL 33173 US			7000 SW 97 AVE STE 211 & STE 118 MIAMI, FL 33173	STE 211 & STE 118	
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
7000 SW 9 STE 211	97 AVE				
MIAMI, FL	33173 US				
FEI Number	: 65-0742529	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
TSENG, A 7000 SW 9 STE 211 S MIAMI, F					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () TSENG, AMY H 10000 SW 63 F MIAMI, FL 331	L	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () HSU, YILING 13457 SW 59 A MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	HSIAO, JANE F 3210 HUNTER I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: AMY H TSENG Ρ 07/23/2008

YEH, BILLY K MDPHD

13611 DEERING BAY DR. #801

CORAL GABLES, FL 33158

Name:

Address:

City-St-Zip: