

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

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000043464

1. Corporation Name

Cibion, Inc.

Principal Place of Business

10484 NW 3rd St.
Plantation FL 33324

Mailing Address

1802-102 N. University
Drive #244
Plantation Florida 33322

2. Principal Place of Business

21 Cibion Inc
Suite, Apt. #, etc.
22 10484 NW 3rd St
City & State
23 Plantation FL
Zip
24 33324
25 USA

2a. Mailing Address

26 Cibion Inc
Suite, Apt. #, etc.
27 1802-102 N. Univ Dr #244
City & State
28 Plantation FL
Zip
29 33322
30 USA

9. Name and Address of Current Registered Agent

Alexander R Brooks
10484 NW 3rd St Plantation FL 33324

3. Date Incorporated or Qualified

May 13 1997

4. FEI Number

650815628

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

[] Yes [X] No

10. Name and Address of New Registered Agent

81 Name Alexander R Brooks
82 Street Address (P.O. Box Number is Not Applicable)
83 10484 NW 3rd St
84 City Plantation
85 FL Zip Code 33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Alex Brooks

Alexander R Brooks

4-7-99

12. OFFICERS AND DIRECTORS

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE [] DELETE
NAME
STREET ADDRESS
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TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

Owner, President Agent
Alex Brooks
10484 NW 3rd St
Plantation FL 33324

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

000002840280-8
-04/15/99--01077--003
****150.00 ****150.00

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

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

SIGNATURE:

Alex Brooks

Alexander R Brooks

4-7-99

(954) 733-0437

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Typed Name)

CRZE034 (11/98)