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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1**9**98

DOCUMENT #

P97000048655 (9)

MICROBIOLOGY ISOLATION CONSULTANTS, INC.

FILED Jun 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1791 Oak Lakes Or -exco & tamiami-trail-suite-0 - 1791 Oak Lakes -2700-S-TAMIAMI TRAIL: SUITE 0 SARASOTA FL 84299- 34232 SARASOTA FL.24200- 34232 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0759426 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KING, CLIFFORD M 1800 SECOND STREET, SUITE 855 Street Address (P.O. Box Number is Not Acceptable) 82 **SARASOTA FL 34236** 83 84 City Zip Code 85 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) IZE034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Treasurer DELETE Change Addition TITLE 1.1 TITLE INGER SVENSON NAME 1.2 NAME 1791 OAK LAKES DRIVE STREET ADDRESS 1.3 STREET ADDRESS PRESIDENT, SECRETARY CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE GLENN MOORE, JR. NAME 2.2 NAME 1473 DART MOUTH DRIVE STREET ADDRESS 2.3 STREET ADDRESS CLEARWATER, FL. 34616 CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CiTY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Z Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELFTE 5.1 TATLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 800002565398 NAME 6.2 NAME -06/19/93--01060--006 6.3 STREET ADDRESS STREET ADDRESS ***150.00 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 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 ecoiver 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 all accurate an address.

NOVATURE OF

Engar Svenson (CEO) 1/2NO8

(041)362-0221