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

PROFIT · CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

## Secretary of State DIVISION OF CORPORATIONS 03-16-1999 90108 050 \*\*\*150.00 1999 DOCUMENT # P98000051956 1. Corporation Name IVX BIOSCIENCE, INC. Mailing Address Principal Place of Business 4400 BISCAYNE BLVD. 4400 BISCAYNE BLVD. **MIAMI FL 33137** MIAMI FL 33137 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/08/1998 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. Fee Required 22 27 City & State \$5.00 May Be 8. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 Country Zip 8. This corporation owes the current year Intangible Country Zip □No Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Gillespie, Carol J. TABERNILLA, ARMANDO A Street Address (P.O. Box Number is Not Acceptable) 82 4400 BISCAYNE BLVD. 4400 Biscayne Boulevard **MIAMI FL 33137** 85 Zip Code 84 City Miami 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. Carol J. Gillespie SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Change ☐ Addition ☐ DELETE 1.1 TTTLE TITLE 1.2 NAME NAME SEE ATTACHED 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change . [ Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Change Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 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 chapted, or on any attachment with an address, with all other like empowered.

SIGNATURE:

## 1999 FLORIDA CORPORATION ANNUAL REPORT IVX BIOSCIENCE, INC. Question 13

D/P

Flanzraich, Neil 4400 Biscayne Boulevard, Miami, FL 33137

D/VP

Beier, Thomas E. 4400 Biscayne Boulevard, Miami, FL 33137

D/S Gillespie, Carol J. 4400 Biscayne Boulevard, Miami, FL 33137

T Siegel, Jordan 4400 Biscayne Boulevard, Miami, FL 33137

AS Nation, Marianne Hurd 4400 Biscayne Boulevard, Miami, FL 33137