

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S17875** (3)

1. Corporation Name
LIFE STAT, INC.



Principal Place of Business
**1700 N 47 AVE
HOLLYWOOD FL 33021**

Mailing Address
**1700 N 47 AVE
HOLLYWOOD FL 33021**

3. Date Incorporated or Qualified
12/03/1990

3a. Date of Last Report
03/10/1995

2. Principal Place of Business
21 **1000 NE 14TH AVE**

Suite, Apt. #, etc.
22 **#203**

City & State
23 **HALLANDALE FL**

Zip
24 **33009**

Country
25 **BROWARD**

2a. Mailing Address
26 **P.O. Box 6314**

Suite, Apt. #, etc.
27

City & State
28 **HOLLYWOOD FL**

Zip
29 **33081**

Country
30 **BROWARD**

4. FEI Number
58-1944664

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**TAVLIN, SANDRA
1700 N 47 AVE
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name
SANDRA TAYLIN

82 Street Address (P.O. Box Number is Not Acceptable)
1000 NE 14TH AVE - #203

83

84 City
HALLANDALE

85 Zip Code
FL 33009

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	TAVLIN, SANDRA	
STREET ADDRESS	1700 N 47 AVE	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change: <input type="checkbox"/> Addition
1.2 NAME	TAVLIN, SANDRA	
1.3 STREET ADDRESS	1000 NE 14TH AVE #203	
1.4 CITY-ST-ZIP	HALLANDALE FL 33009	
2.1 TITLE		<input type="checkbox"/> Change: <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change: <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change: <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change: <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change: <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Sandra Taylin Pres* **SANDRA TAYLIN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 **9543212941**

Date Daytime Phone #

CR2E034 (12/95)