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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S78680

(3)

MAREXEL CORPORATION					1 100/1010 tit 18550t 10/10 8/100 10/10 80/10	Alan bidin aikin diam ai	1811 8 78# 1861		
Principal Place of Business Malling Address 80 S HIGHWAY 17-92 80 S HIGHWAY 17-92 DEBARY FL 32713 DEBARY FL 32713-3330			,	,					
						3. Date Incorporated or Qualified	3a. Date of Las	, I	
2. Princinal Pt	ace of Business	2a. Mailing Address				09/05/1991 4. FEI Number	05/01/1996	Applied For	
21	tion of Eddinoso	26				59-3091016	} }	Not Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.						5 Additional	
22		27				Certificate of Status Desired	Fee	Required	
Cily & State	9	City & State				6. Election Campaign Financing		00 May Be	
23		28				Trust Fund Contribution		ed to Fees	
Zip			Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	25 9. Name and Address of Currer	29	30	T		Florida Statutes 10. Name and Address of New Reg			
		it Hegistered Agent		61 Na	me	IV. Hallie BIO Addides VI Hew Me	haraign whenr		
80 S	YAS, MARCELO R OUTH HIGHWAY 17-92 ARY FL 32713		·	82 Stre 83		iss (P.O. Box Number is Not Acceptab	RE 7.	ip Code	
				l I '			FL T	'	
SIGNATURE	Signature Typed or prosted name of registered age					oration submits this statement for the pon's board of directors. I hereby accept d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE		
Tiffet	0	☐ DELETE	DELETE 1.1.1				Chang	ge Addition	
NAME	ANAYAS, MARCELO R		1.2 N	AME	İ				
STREET ADDRESS	60 S HIGHWAY 17-92		1.3 \$	TREET ADDRE	SS				
CITY - ST - ZIF	DEBARY FL	······································	1.40	ITY-ST-ZIP					
TITLE	D	DELETE	217		- (Chang	ge L∐ Addition [
NAME	ANAYAS, CONCEPCION S	•	22 N						
STREET ADDRESS	80 S HIGHWAY 17-92 DEBARY FL			TREET ADDRE	SS	•			
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NAME			3.2 N		1		والدان لي	,u Lindson	
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CITY-ST-ZIP				HTY-ST-ZIP					
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NAME			4.21	IAME					
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C(TY - S1 - ZIP			4.4 0	ITY-ST-ZIP					
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NAME			5.2 N	AME	i				
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CHY SI-ZIF		DELETE	540 61T	TY-ST-ZIP			Chang	ge L Addition	
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STREET ADDRESS				anie Treet addri	223				
CITY - S1 - 2IF			- 1	ITY - ST - ZIP					
14. I do hereb	by certify that the information supplie	d with this filing does not q	ualify for the	exempti	on stated	in Section 119.07(3)(i), Florida Statute	s. I further certify th	nat the	
information Lam an of	in indicated on this annual report or a	supplemental annual report r the receixer or xustee emp	is true and cowered to	accuráte	and that r	my signature shall have the same lega as required by Chapter 607, Florida S	1 effect as if made	under oath; that	