

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

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90065 046 ***150.00

DOCUMENT # S88268

1. Corporation Name

BIO-ANALYTIC LABORATORIES, INC.

Principal Place of Business

**3481 PALM CITY SCHOOL RD
P.O. BOX 388
PALM CITY FL 34990**

Mailing Address

~~1070 E INDIANTOWN RD~~
~~SUITE 208~~
~~JUPITER FL 33477~~
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/18/1991

4. FEI Number

65-0306130

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 ☐ No

2. Principal Place of Business

21 3481 Palm City School Rd

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 PALM CITY, FL

City & State

28

Zip

24 34990

Country

25 MARTIN

Zip

Country

30

9. Name and Address of Current Registered Agent

**NATIONAL STOCK TRANSFER & ACCTNG INC
157 COVENTRY PLACE
#208
PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 **NAT'L Stock Transfer & Accounting, Inc**

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

D

☐ DELETE

NAME

BIRBILIS, DANIEL

STREET ADDRESS

1070 E. INDIANTOWN RD., #208

CITY-ST-ZIP

JUPITER FL

TITLE

D

☐ DELETE

NAME

WILKINSON, FLOYD D. SR

STREET ADDRESS

1070 E INDIANTOWN RD SUITE 208

CITY-ST-ZIP

JUPITER FL

TITLE

DP

☐ DELETE

NAME

HUNTER, MACK L

STREET ADDRESS

1070 E INDIANTOWN RD #208

CITY-ST-ZIP

JUPITER FL 33477

TITLE

☐ DELETE

NAME

☐ DELETE

STREET ADDRESS

☐ DELETE

CITY-ST-ZIP

☐ DELETE

TITLE

☐ DELETE

NAME

☐ DELETE

STREET ADDRESS

☐ DELETE

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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: **Mack L Hunter**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-99
Date

561-287-3340
Daytime Phone #

CR2E034 (1/98)