

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

FILED

Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # V37024 (9)  
1. Corporation Name  
C & A SCIENTIFIC CORPORATION

Principal Place of Business  
8732 NW 4 ST  
PLANTATION FL 33324

Mailing Address  
1859 N PINE ISLAND RD  
154  
PLANTATION FL 33322-5224  
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/15/1992		3a. Date of Last Report 05/01/1996	
21 1859 N. Pine Island Rd		26 Suite, Apt. #, etc.		4. FEI Number 65-0341349		Applied For Not Applicable	
22 Suite 154		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Plantation, FL		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33322		25 U.S.A.		29 Zip		30 Country	
24 33322		25 U.S.A.		29 Zip		30 Country	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
EHMANN, ANDREW 8732 N W 4TH ST PLANTATION FL 33324				81 Name Ehmamm, Andrew			
				82 Street Address (P.O. Box Number is Not Acceptable) 4200 Inverrary BL #3705			
				83			
				84 City lauderhill FL 85 Zip Code 33319			

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 Andrew V Ehmamm PVT Andrew Ehmamm 4/22/97  
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PVT	<input type="checkbox"/> DELETE		1.1 TITLE	PVT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EHMANN, ANDREW			1.2 NAME	Ehmamm, Andrew		
STREET ADDRESS	8732 N W 4TH ST			1.3 STREET ADDRESS	4200 Inverrary BL #3705		
CITY-ST-ZIP	PLANTATION FL			1.4 CITY-ST-ZIP	lauderhill, FL 33319		
TITLE	VP	<input type="checkbox"/> DELETE		2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EHMANN, ANDREW			2.2 NAME	Ehmamm, Andrew		
STREET ADDRESS	8732 N.W. 4TH ST.			2.3 STREET ADDRESS	4200 Inverrary BL #3705		
CITY-ST-ZIP	PLANTATION, FL			2.4 CITY-ST-ZIP	lauderhill, FL 33319		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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.

SIGNATURE: Andrew V Ehmamm Andrew Ehmamm 4/22/97 954 486 1737

CR2E034 (9/96)