

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005343

FILED
Apr 17, 2006
Secretary of State

Entity Name: RESEARCH PHARMACEUTICAL SEARCH, INC.

Current Principal Place of Business:

610 W. GERMANTOWN PIKE, SUITE 200
PLYMOUTH MEETING, PA 19462

New Principal Place of Business:

Current Mailing Address:

610 W. GERMANTOWN PIKE, SUITE 200
PLYMOUTH MEETING, PA 19462

New Mailing Address:

FEI Number: 23-2735793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PERLMAN, DANIEL
Address: 610 GERMANTOWN PIKE, SUITE 200
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: VCFO () Delete
Name: BELL, STEVEN
Address: 610 W. GERMANTOWN PIKE, SUITE 200
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: DCOO () Delete
Name: BRENNAN, JANET
Address: 610 W. GERMANTOWN PIKE, SUITE 200
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: V () Delete
Name: ARCANGELO, JOSEPH
Address: 610 W. GERMANTOWN PIKE, SUITE 200
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: D () Delete
Name: RAYNOR, DANIEL
Address: 60 MADISON AVE. SOUTH, SUITE 701
City-St-Zip: NEW YORK, NY 10010

Title: D () Delete
Name: REISLEY, ROBERT
Address: 225 SOUTH 25TH STREET
City-St-Zip: PHILADELPHIA, PA 19103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE BELL

VCFP

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date