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07-13-1999 90008 002 ***550.00

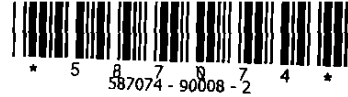


FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # *F98000005227*

1. Corporation Name
 GeneScreen Inc.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 Qualified September 17, 1998

2. Principal Place of Business 21 2600 Stemmons Freeway		2a. Mailing Address 26 2600 Stemmons Freeway		4. FEI Number 75-2212387		Applied For Not Applicable	
Suite, Apt. #, etc. 22 Suite 133		Suite, Apt. #, etc. 27 Suite 133		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State 23 Dallas, TX		City & State 28 Dallas, TX		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip 24 75207		Country 25 USA		Zip 29 75207		Country 30 USA	
				8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT Corporation System 1200 South Pine Island Road Plantation, FL 33324				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input type="checkbox"/> DELETE		1.1 TITLE	President/Chairman <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	Keith W. Brown
STREET ADDRESS		1.3 STREET ADDRESS	2600 Stemmons Freeway, Ste. 133
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Dallas, TX 75207
TITLE <input type="checkbox"/> DELETE		2.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Timothy A. Mack
STREET ADDRESS		2.3 STREET ADDRESS	1601 Bryan Street, 30th Fl.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Dallas, TX 75201
TITLE <input type="checkbox"/> DELETE		3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Philip Goelet
STREET ADDRESS		3.3 STREET ADDRESS	1101 N. Charles Street, Suite 204
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Baltimore, MD 21202
TITLE <input type="checkbox"/> DELETE		4.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Jennifer Lobo
STREET ADDRESS		4.3 STREET ADDRESS	One Palmer Square
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Princeton, NJ 08842
TITLE <input type="checkbox"/> DELETE		5.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Frank A. Bonsal, Jr.
STREET ADDRESS		5.3 STREET ADDRESS	1119 St. Paul Street
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Baltimore, MD 21202
TITLE <input type="checkbox"/> DELETE		6.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	C. V. Prothro
STREET ADDRESS		6.3 STREET ADDRESS	4401 South Beltwood Parkway
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Dallas, TX 75244

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: *Keith W. Brown, President* *Keith W. Brown* 4/27/99 (214) 631-8152
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CORPORATION

009068776
F98000052272

ATTACHMENT TO 1999 ANNUAL REPORT

GeneScreen Inc.

ADDITIONAL OFFICER'S/DIRECTORS

Director
Glenn M. Stinchcomb
10111 North Central Expressway
Dallas, TX 75231