

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanna B. Mathias
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P36521** (3)

1. Corporation Name
U.S. BIOSCIENCE, INC.



Principal Place of Business
**ONE TOWER BRIDGE
100 FRONT STREET
WEST CONSHOHOCKEN PA 19428**

Mailing Address
**ONE TOWER BRIDGE
100 FRONT STREET
WEST CONSHOHOCKEN PA 19428**

3. Date incorporated or Qualified: **12/04/1991** 3a. Date of Last Report: **05/01/1995**

4. FEI Number: **23-2460100** 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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

25. Name and Address of Current Registered Agent

26. Mailing Address

27. Suite, Apt. #, etc.

28. City & State

29. Zip

30. Country

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81. Name

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

83.

84. City

85. Zip Code

11. Pursuant to the provisions of Sections 607.0215 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 607.0205, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
FILE	NAME	FILE	NAME
<input type="checkbox"/> DELETE	C SCHEIN, PHILIP 100 FRONT ST W. CONSHOHOCKEN PA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	CP
<input type="checkbox"/> DELETE	VTD KRIEBEL, ROBERT 100 FRONT STREET W. CONSHOHOCKEN PA	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> DELETE	VD CAPIZZI, ROBERT 100 FRONT STREET W. CONSHOHOCKEN PA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	D

14. I do hereby certify that the information supplied with this filing voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this corporation's 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 registrar or trustee, or person to be examined by the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/96 (610) 833-4939

CR2E034 (12/95)