

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 425917

FILED  
Mar 23, 2004  
Secretary of State

Entity Name: DUSA DISTRIBUTION CENTER,INC.

## Current Principal Place of Business:

7175 N WICKHONE RD  
MELBOURNE, FL 32940

## New Principal Place of Business:

10060 NW 62ND STREET  
PARKLAND, FL 330762342 US

## Current Mailing Address:

1791 HIGHWAY A1A  
1402  
INDIAN HARBOUR BEACH, FL 32937 US

## New Mailing Address:

10060 NW 62ND STREET  
PARKLAND, FL 330762342 US

FEI Number: 59-1486305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHNEIDER, DUANE E  
7175 N WICKHAM RD  
MELBOURNE, FL 32935

## Name and Address of New Registered Agent:

SCHNEIDER, DUANE E PDS  
10060 NW 62ND STREET  
PARKLAND, FL 330762342 US

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: DUANE E SCHNEIDER

03/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete  
Name: SCHNEIDER, DUANE,  
Address: 1791 HIGHWAY A1A , #1402  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: TV (X) Delete  
Name: SCHNEIDER, SANDRA,  
Address: 1791 HIGHWAY A1A , #1402  
City-St-Zip: INDAIN HARBOUR BEACH, FL 32937

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition  
Name: SCHNEIDER, DUANE,  
Address: 10060 NW 62ND STREET  
City-St-Zip: PARKLAND, FL 330762342 US

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 Section 119.07(3)(i), 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: DUANE E SCHNEIDER

PDS

03/23/2004

Electronic Signature of Signing Officer or Director

Date