

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006585

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: BIOSCIENCES HOLDINGS, INC.

## Current Principal Place of Business:

11737 CENTRAL PKWY, STE A  
JACKSONVILLE, FL 32224

## New Principal Place of Business:

11737 CENTRAL PARKWAY, STE A  
JACKSONVILLE, FL 32224

## Current Mailing Address:

11737 CENTRAL PKWY, STE A  
JACKSONVILLE, FL 32224

## New Mailing Address:

11737 CENTRAL PARKWAY, STE A  
JACKSONVILLE, FL 32224

FEI Number: 59-3677617

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PORTER, PAUL C  
11737 CENTRAL PKWY., STE A  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

MCMAHON, THOMAS G  
11737 CENTRAL PARKWAY., STE A  
JACKSONVILLE, FL 32224 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: THOMAS G MCMAHON

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPTD ( ) Delete  
Name: PORTER, PAUL C  
Address: 10737 CENTRAL PKWY  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete  
Name: SCHEPPE, PAYTON  
Address: 11737 CENTRAL PARKWAY, STE A  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete  
Name: MCMAHON, T GORDEN  
Address: 11737 CENTRAL PARKWAY STE A  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D (X) Delete  
Name: HOROWITZ, JEFFREY  
Address: 11737 CENTRAL PKWY.  
City-St-Zip: JACKSONVILLE, FL 32224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPTD (X) Change ( ) Addition  
Name: MCMAHON, THOMAS G  
Address: 11737 CENTRAL PARKWAY, STE A  
City-St-Zip: JACKSONVILLE, FL 32224

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

Title: D (X) Change ( ) Addition  
Name: HOROWITZ, JEFFREY  
Address: 11737 CENTRAL PARKWAY STE A  
City-St-Zip: JACKSONVILLE, FL 32224

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: THOMAS G MCMAHON

CPTD

04/22/2004

Electronic Signature of Signing Officer or Director

Date