2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002361

Entity Name: MGEN SERVICES CORP.

FILED Jun 30, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
SUITE 230	D HILL AVENU A, CA 92705	E					
Current Mailing Address:				New Mailing Address:			
2510 N. RED HILL AVENUE SUITE 230 SANTA ANA, CA 92705				C/O MADELINE BAREWALD 17911 VON KARMAN AVE., SUITE 300 IRVINE, CA 92614			
FEI Number:	El Number: 33-0956193 FEI Number Applied For () FEI Nu		FEI Nun	nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
TCS CORPORATE SERVICES, INC. 103 N. MERIDIAN STREET TALLAHASSEE, FL 323010000 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:							
Electronic Signature of Registered Agent Date							
		Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	WALKER, DWAY	L AVENUE, STE 230		Title: Name: Address: City-St-Zip:	PD (X) Change (HERSHKOWITZ, BRIAN F 601 RIVERSIDE AVE. JACKSONVILLE, FL 3220		
Title: Name: Address: City-St-Zip:	VALEZ, FERNANI	L AVENUE, STE 230		Title: Name: Address: City-St-Zip:	S (X) Change (JOHNSON, TODD C 601 RIVERSIDE AVE. JACKSONVILLE, FL 3220		
Title: Name: Address: City-St-Zip:	FARENGA, PATR	L AVENUE, STE 230		Title: Name: Address: City-St-Zip:	T (X) Change (FARENGA, PATRICK 601 RIVERSIDE AVE. JACKSONVILLE, FL 3220		
Title: Name: Address: City-St-Zip:	VP (X) D JOHNSON, NELL 2510 N. RED HIL SANTA ANA, CA	L AVENUE, STE 230		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STONE, PATRICH	L AVENUE, STE 230		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address:	D (X) E SMITH, ERNIE 2510 REDHILL A			Title: Name: Address:	()Change() Addition	

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: TODD C JOHNSON S 06/30/2005