## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000002628

Entity Name: INNOVEX SUPPORT SERVICES, CO.

FILED May 01, 2006 Secretary of State

| Current Pri   | incipal Place                 | of Business:                 | New Princ                | New Principal Place of Business: |                                   |           |  |
|---|-------------------------------|------------------------------|--------------------------|----------------------------------|-----------------------------------|-----------|--|
| 10 WATERVIEW BOULEVARD PARSIPPANY, NJ 07054   |                               |                              |                          |                                  |                                   |           |  |
| Current Mailing Address:  |                               |                              | New Maili                | New Mailing Address:             |                                   |           |  |
| 10 WATERVIEW BOULEVARD PARSIPPANY, NJ 07054   |                               |                              |                          |                                  |                                   |           |  |
| FEI Number: 22-3529314  |                               | FEI Number Applied For ( )   | FEI Number Not App       | licable ( )                      | Certificate of Status Desired ( ) |           |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent:   |                               |                              |                          |                                  |                                   |           |  |
| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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                             |                                   |           |  |
| In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:   |                               |                              |                          |                                  |                                   |           |  |
|   |                               |                              |                          |                                  |                                   | IKECTORS. |  |
| Title:<br>Name:   | PRES ()  YOST, TONY           | Delete                       | Title:<br>Name:          |                                  | ( ) Change ( ) Addition           |           |  |
| Address:<br>City-St-Zip:  | 10 WATERVIEW<br>PARSIPANNY, N |                              | Address:<br>City-St-Zip: |                                  |                                   |           |  |
| Title:  |                               | Delete                       | Title:                   |                                  | ( ) Change ( ) Addition           |           |  |
| Name:<br>Address:   | BUDESA, KENNI<br>10 WATERVIEW |                              | Name:<br>Address:        |                                  |                                   |           |  |
| City-St-Zip:  | PARSIPPANY, N                 |                              | City-St-Zip:             |                                  |                                   |           |  |
| Title:  | V ()                          | Delete                       | Title:                   |                                  | ( ) Change ( ) Addition           |           |  |
| Name:   | ANDREWS, R. D                 |                              | Name:                    |                                  |                                   |           |  |
| Address:<br>City-St-Zip:  | DURHAM, NC 2                  | ONE DRIVE, SUITE 200<br>7703 | Address:<br>City-St-Zip: |                                  |                                   |           |  |
| Title:  |                               | Delete                       | Title:                   |                                  | ( ) Change ( ) Addition           |           |  |
| Name:   | RUSSELL, JOHN                 |                              | Name:                    |                                  |                                   |           |  |
| Address:<br>City-St-Zip:  | DURHAM, NC 2                  | ONE DRIVE, SUITE 200<br>7703 | Address:<br>City-St-Zip: |                                  |                                   |           |  |
| Title:  | S ()                          | Delete                       | Title:                   | S                                | (X) Change ( ) Addition           |           |  |
| Name:   | GREEN, ERIC                   |                              | Name:                    | GREEN, ERI                       |                                   |           |  |
| Address:<br>City-St-Zip:  | 10 WATERVIEW<br>PARSIPPANY, N |                              | Address:<br>City-St-Zip: | 4709 CREEK<br>DURHAM, NO         | (STONE DRIVE<br>C 27703           |           |  |
| Title:  |                               | Delete                       | Title:                   |                                  | () Change () Addition             |           |  |
| Name:   | RUBIN, BEVERL                 |                              | Name:                    |                                  |                                   |           |  |
| Address:<br>City-St-Zip:  | DURHAM, NC 2                  |                              | Address:<br>City-St-Zip: |                                  |                                   |           |  |
| I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 |                               |                              |                          |                                  |                                   |           |  |

SIGNATURE: BEVERLY L. RUBIN AS 05/01/2006

above, or on an attachment with an address, with all other like empowered.