## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006835

Entity Name: BIOSPACE, INC.

FILED Mar 10, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
2399 HIGH	- WAY 34 SOUT IAN, NJ 08736				
Current Mailing Address:			New Mailii	New Mailing Address:	
C/O ONTA 353 BEREA WALDEN,		NC.			
FEI Number:	32-0157871	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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.					
SIGNATUR	RE:				
Electronic Signature of Registered Agent				Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PASCHAL, ALLE	34 SOUTH, BLDG A-5	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition PASCHAL, ALLEN 2399 HIGHWAY 34 SOUTH, BLDG A-5 MANASQUAN, NJ 08736	
Title: Name: Address: City-St-Zip:	PASCHAL, ALLE	34 SOUTH, BLDG A-5	Title: Name: Address: City-St-Zip:	CEO (X) Change ( ) Addition CREWS, WES 2399 HIGHWAY 34 SOUTH, BLDG A-5 MANASQUAN, NJ 08736	
Title: Name: Address: City-St-Zip:	THOMPSON, CU	34 SOUTH, BLDG A-5	Title: Name: Address: City-St-Zip:	CFO (X) Change ( ) Addition BANISTER, DOUGLAS 2399 HIGHWAY 34 SOUTH, BLDG A-5 MANASQUAN, NJ 08736	
Title: Name: Address: City-St-Zip:	THOMPSON, CU	34 SOUTH, BLDG A-5	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COLODNY, MAR	34 SOUTH, BLDG A-5	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SADRIAN, JUSTI	34 SOUTH, BLDG A-5	Title: Name: Address: City-St-Zip:	() Change () Addition	

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

SIGNATURE: CURTIS THOMPSON ST 03/10/2006