2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2008
Secretary of State

DOCUMENT# F06000000407

Entity Name: APPLIED GENETICS INCORPORATED DERMATICS

Current Principal Place of Business:

205 BUFFALO AVE
FREEPORT, NY 11520

New Principal Place of Business:

Current Mailing Address:

205 BUFFALO AVE
FREEPORT, NY 11520

New Mailing Address:

FEI Number: 11-3395114 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 S DADELAND BLVD STE 508
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: YAROSH, DANIEL B
Address: 205 BUFFALO AVE
City-St-Zip: FREEPORT, NY 11520

Title: V ( ) Delete
Name: KLEIN, JONATHAN
Address: 205 BUFFALO AVE
City-St-Zip: FREEPORT, NY 11520

Title: ST ( ) Delete
Name: YAROSH, KAREN
Address: 205 BUFFALO AVE
City-St-Zip: FREEPORT, NY 11520

Title: D ( ) Delete
Name: NUSIM, STANLEY
Address: 19355 NE 36TH CT STE 4L
City-St-Zip: AVENTURA, FL 33180

Title: D ( ) Delete
Name: FINK, ANDREW A
Address: TREVI VENTURES,110 EAST 59 STREET, 33RD FL
City-St-Zip: NEW YORK, NY 10022

Title: D ( ) Delete
Name: CAPLAN, JOHN
Address: FORD MODELS INC.,111 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: YAROSH, DANIEL B
Address: 205 BUFFALO AVE
City-St-Zip: FREEPORT, NY 11520

Title: EVP (X) Change ( ) Addition
Name: KLEIN, JONATHAN
Address: 205 BUFFALO AVE
City-St-Zip: FREEPORT, NY 11520

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JONATHAN KLEIN EVP 05/30/2008

Electronic Signature of Signing Officer or Director — Date