2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002252

FILED Mar 29, 2004 Secretary of State

Entity Name: PHARMACEUTICAL RESEARCH NETWORK INC

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
	MAICA AVEN ID HILL, NY 1				
Current Mailing Address:		New Mailing Addres	New Mailing Address:		
	MAICA AVEN ID HILL, NY 1				
FEI Number	: 11-2855442	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
GAZZALE	LOUIS				
The above	Ń ST. iT, FL 33040 e named entity e of Florida.	US submits this statement for th	e purpose of changing its registere	ed office or registered agent, or both,	
1320 LEO KEY WES The above in the Stat	Ń ST. iT, FL 33040 e named entity e of Florida. RE:			od office or registered agent, or both,	
1320 LEO KEY WES The above in the Stat SIGNATU	Ń ST. iT, FL 33040 e named entity e of Florida. RE: Electro	submits this statement for th			
1320 LEO KEY WES The above in the Stat SIGNATU Election Ca	Ń ST. iT, FL 33040 e named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ang Trust Fund Contribution ().	ngent	Date	
1320 LEO KEY WES The above in the Stat SIGNATU Election Ca	N ST. iT, FL 33040 e named entity e of Florida. RE: Electro mpaign Financir S AND DIRECT P (GAZZALE, LO 85-26 109TH S	submits this statement for the nic Signature of Registered Ang Trust Fund Contribution (). CTORS:) Delete UIS	ngent		

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: LOUIS GAZZALE PRES 03/29/2004