

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L50675

FILED
May 04, 2005
Secretary of State

Entity Name: TRANSDERMAL TECHNOLOGIES, INC.

Current Principal Place of Business:

1368 N. KILLIAN DRIVE
LAKE PARK, FL 33403 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14804
NORTH PALM BEACH, FL 334080804 US

New Mailing Address:

FEI Number: 65-0172954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRBY, KENNETH B.
6 SELBY LANE
PALM BEACH GARDENS, FL 33418 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

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:

Title: PD () Delete
Name: KIRBY, KENNETH B.,
Address: 8631 URANUS TERR.
City-St-Zip: LAKE PARK, FL

Title: D () Delete
Name: KIRBY, JOSEPH M.,
Address: 6543 LAKE CHARM CIRCLE
City-St-Zip: OVIEDO, FL

Title: VD () Delete
Name: CRAWFORD, BRUCE
Address: 11467 RIVERWOOD PLACE
City-St-Zip: NORTH PALM BEACH, FL

Title: S () Delete
Name: ARASIM, ANNIS
Address: 8 KINTYRE RD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: ROSENKETTER, DON
Address: 1368 N KILLIAN DR
City-St-Zip: LAKE PARK, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

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: KENNETH KIRBY

PRES

05/04/2005

Electronic Signature of Signing Officer or Director

Date