2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000023523

Entity Name: DEVRX LABORATORIES, INC.

FILED Jan 14, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5160 FOXHALL DRIVE SOUTH 1097 JUPITER PARK LANE WEST PALM BEACH, FL 33417 SUITE 5

JUPITER, FL 33458

Current Mailing Address: New Mailing Address:

P.O. BOX 220862 1097 JUPITER PARK LANE WEST PALM BEACH, FL 33417 SUITE 5

JUPITER, FL 33458

FEI Number: 65-0989008 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCALLISTER, MATTHEW S
3230 COMMERCE PLACE
WEST PALM BEACH, FL 33417 US
MCCALLISTER, MATTHEW S
1097 JUPITER PARK LANE
SUITE 5
JUPITER, FL 33458 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: MATTHEW S. MCCALLISTER 01/14/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: D () Change (X) Addition

Name: Name: ROSEN, CHRISTER
Address: Address: 1097 JUPITER PARK LANE, #5

Address: Address: 1097 JUPITER PARK LANE, #/
City-St-Zip: City-St-Zip: JUPITER, FL 33458

Title: V () Delete Title: DV (X) Change () Addition
Name: MCCALLISTER, I. DAVID
Address: 8254 BOBOLINK DRIVE Address: 1097 JUPITER PARK LANE, #5

City-St-Zip: WEST PALM BEACH, FL 33412 City-St-Zip: JUPITER, FL 33458

() Delete Title: Title: **PSDC** (X) Change () Addition MCCALLISTER, MATTHEW S Name: MCCALLISTER, MATTHEW S Name: 5160 FOXHALL DRIVE SOUTH Address: 1097 JUPITER PARK LANE, #5 Address City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: JUPITER, FL 33458

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: MATTHEW S. MCCALLISTER P 01/14/2002