


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P00000070485 |  |
| 1. Entity Name CELLUTION MEDICAL HOLDINGS, INC. | |

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|---|---|
| Principal Place of Business 1355WEST PALMETTO PARK ROAD SUITE 104 BOCA RATON, FL 33486 | Mailing Address 1355WEST PALMETTO PARK ROAD SUITE 104 BOCA RATON, FL 33486 |
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DO NOT WRITE IN THIS SPACE



07082004 No Chg-P CR2E034 (10/03)

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|---|---------------------------------------|
| 4. FEI Number 65-1026752 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent ABUSCH, SIDNEY 1355 W PALMETTO PARK RD, SUITE 104 BOCA RATON, FL 33486 | DO NOT WRITE IN THIS SPACE |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | |

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

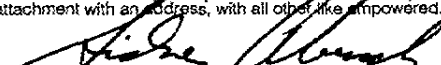
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|---|---|---|
| FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ABUSCH, SIDNEY 1355 W PALMETTO PARK RD, SUITE 104 BOCA RATON, FL 33482 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DANCIU, GEORGE 1100 WEST COMMERCIAL BLVD FT LAUDERDALE, FL 33309 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FERGUSON, ROBERT 1100 WEST COMMERCIAL BLVD FT LAUDERDALE, FL 33309 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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100000165107
07/09/04-80017-005 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIDNEY ABUSCH** **7/8/2004** **561-654-5862**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #