

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027681

Entity Name: ZYLOMED CORPORATION

FILED  
Jan 26, 2004  
Secretary of State

## Current Principal Place of Business:

1303 N GREENWAY DR  
CORAL GABLES, FL 33134

## New Principal Place of Business:

6459 HIGHCROFT DR  
NAPLES, FL 34119

## Current Mailing Address:

1303 N GREENWAY DR  
CORAL GABLES, FL 33134

## New Mailing Address:

6459 HIGHCROFT DR  
NAPLES, FL 34119

FEI Number: 65-1102641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAUX, J. PATRICK  
1303 N GREENWAY DR  
CORAL GABLES, FL 33134

## Name and Address of New Registered Agent:

LAUX, J. PATRICK  
6459 HIGHCROFT DR  
NAPLES, FL 34119

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: J P LAUX

01/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LAUX, J. PATRICK  
Address: 1303 N GREENWAY DR  
City-St-Zip: CORAL GABLES, FL 33134

Title: O ( ) Delete  
Name: SUMNER, SUSAN L  
Address: 1303 N. GREENWAY DR.  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LAUX, J. PATRICK  
Address: 6459 HIGHCROFT DR  
City-St-Zip: NAPLES, FL 34119

Title: O (X) Change ( ) Addition  
Name: SUMNER, SUSAN L  
Address: 6459 HIGHCROFT DR  
City-St-Zip: NAPLES, FL 34119

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: J P LAUX

PRES

01/26/2004

Electronic Signature of Signing Officer or Director

Date