2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032393

FILED
Feb 23, 2005
Secretary of State

Entity Name: HARRIS PHARMACEUTICAL, INC.

Current Principal Place of Business:

14929 CALEB DRIVE
FT MYERS, FL 33908

New Principal Place of Business:

12500 WORLD PLAZA LANE
STE 3
FT MYERS, FL 33907

Current Mailing Address:

PO BOX 8238
FT MYERS, FL 339088238

New Mailing Address:

PO BOX 8238
FT MYERS, FL 33908

FEI Number: 32-0008996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, BRIAN A MD
14929 CALEB DRIVE
FT MYERS, FL 33908 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HARRIS, BRIAN A MD
Address: 14929 CALEB DRIVE
City-St-Zip: FT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRIAN A HARRIS D 02/23/2005

Electronic Signature of Signing Officer or Director Date