2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2003
Secretary of State

DOCUMENT# P02000032837

Entity Name: ALLERGISTICS, INC.

Current Principal Place of Business:

2615 WEST GRAND RESERVE CIRCLE
SUITE 337
CLEARWATER, FL 33759

New Principal Place of Business:

1509 WILLOW BROOK DRIVE
PALM HARBOR, FL 34683

Current Mailing Address:

2615 WEST GRAND RESERVE CIRCLE
SUITE 337
CLEARWATER, FL 33759

New Mailing Address:

1509 WILLOW BROOK DRIVE
PALM HARBOR, FL 34683

FEI Number: 75-3031415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARKEY, SCOTT T PH.D.
2615 WEST GRAND RESERVE CIRCLE
SUITE 337
CLEARWATER, FL 33759

Name and Address of New Registered Agent:

HARKEY, SCOTT T PH.D.
1509 WILLOW BROOK DRIVE
PALM HARBOR, FL 34683

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: _____ 09/09/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HARKEY, SCOTT T PH.D.
Address: 2615 WEST GRAND RESERVE CIRCLE; SUITE 337
City-St-Zip: CLEARWATER, FL 33759

Title: EV ( ) Delete
Name: SAMARKOS, VICTORIA
Address: 2717 SEVILLE BLVD; SUITE 8206
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HARKEY, SCOTT T PH.D.
Address: 1509 WILLOW BROOK DRIVE
City-St-Zip: PALM HARBOR, FL 34683

Title: EV (X) Change ( ) Addition
Name: HARKEY, VICTORIA S PHARMD
Address: 1509 WILLOW BROOK DRIVE
City-St-Zip: PALM HARBOR, FL 34683

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: SCOTT T. HARKEY, PH.D. P 09/09/2003
Electronic Signature of Signing Officer or Director — Date