

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

03-15-2004 90056 039 ***150.00
05-04-2004 90180 025 ***150.00

DOCUMENT # P03000048600

1. Entity Name
NEURAL SCIENCE RESEARCH INC.



Principal Place of Business
6662 NATURE PRESERVE CT.
NAPLES, FL 34109

Mailing Address
6662 NATURE PRESERVE CT.
NAPLES, FL 34109

14020176



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02222004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

20-0180189

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNSINN, JOSEPH M
6662 NATURE PRESERVE CT.
NAPLES, FL 34109

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Unsinn, Joseph M.
6662 Nature Preserve Ct.
Naples, FL 34109

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Leeber, Brian
27200 Riverview Center Blvd., Ste 109
Bonita Springs, FL 34134

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE:

Joe Unsinn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/04
Date

239-673-2074
Daytime Phone

Attachment

14620176
#P03000048600

Attachment

#P03000048600

JOHN W. SCHARLACKEN, ESQ.
SHAREHOLDER
LAW OFFICES OF JOHN W. SCHARLACKEN
8142 LOWBANK DRIVE
NAPLES, FL 34108-7074

COMPLETE THIS SECTION ON DELIVERY

A. Signature (of Addressee or Agent)
[Signature]

B. Receipt By: (Please Print, Agent/Postmaster)
[Signature]

C. Date of Delivery
MAY 15 2004

D. Addressee's Address (If Different from Address Used on Label)
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATE FILINGS
P.O. BOX 1500
TALLAHASSEE FL 32302-1500

Secondary Address / Suite / Apt. / Floor (Please Print Clearly)
Delivery Address
City
State
ZIP + 4 Code

1. Article Addressed To:
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATE FILINGS
P.O. BOX 1500
TALLAHASSEE FL 32302-1500

2. Article Number
7114 2794 0020 0000 0025

3. Service Type
CERTIFIED

4. Restricted Delivery? ☐ Yes ☒ No
Extra Fee ☐ Yes ☒ No

USPS Vanderbilt Beach Branch
Naples, Florida
34108709
1189290476-0096
(239)594-2664

03/11/2004	09:06:17 AM
Product Description	Sales Receipt
Qty	Unit
Price	Final Price

TALLAHASSEE FL 32302
First-Class
Return Receipt
Certified
Label Serial #: 71142794002000000025
Issue PVI: \$4.42

Total: \$4.42
Paid by: Visa
Account #: XXXXXXXXXX5722
Approval #: 057712
Transaction #: 957
23 903572105
Exp. 07/05
Exp. 057712

Bill #: 1000400865084
Clerk: 02

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business.
Customer Copy

RECEIPT
7114 2794 0020 0000 0025

FROM:
John W. Scharlacken, Esq.
RE: NSR 2004 UBR Filing

SEND TO:
Department of State
Division of Corporations
Corporate Filings
P.O. Box 1500
Tallahassee FL 32302-1500

FEES:
Postage 0.37
Certified 2.30
Return Receipt 1.75
Total 4.42

USPS
VANDERBILT BEACH
FL 34108
MAY 15 2004
MARK OR DATE