2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061327

Entity Name: WELLCORE LABS, INC.

FILED Sep 20, 2004 Secretary of State

() Change () Addition

Current Principal Place of Business:	New Principal Place of Business:
2201 CANTU CT., STE. 200 SARASOTA, FL 34232	5113 INVERNESS DRIVE SARASOTA, FL 34243
Current Mailing Address:	New Mailing Address:
2201 CANTU CT., STE. 200 SARASOTA, FL 34232	5113 INVERNESS DRIVE SARASOTA, FL 34243
FEI Number: 55-0834274 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
CHASE, STEVEN J 240 SOUTH PINEAPPLE AVE., 10TH FLOOR SARASOTA, FL 34236 US	WOLFINGER, WILLIAM E 5113 INVERNESS DRIVE SARASOTA, FL 34243 US
The above named entity submits this statement for the pur in the State of Florida.	rpose of changing its registered office or registered agent, or both,
SIGNATURE: W E WOLFINGER	09/20/2004
Electronic Signature of Registered Agent	t Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not re Election Campaign Financing Trust Fund Contribution ().	eceive the prior notice.
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: D () Delete Name: BJORNDAL, LEIV Address: 2201 CANTU CT., STE. 200 City-St-Zip: SARASOTA, FL 34232	Title: () Change () Addition Name: Address: City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

Title:

() Delete

2201 CANTU CT., STE. 200

SARASOTA, FL 34232

MARTINSEN, BO

Title:

Name:

Address:

City-St-Zip:

Title: () Change (X) Addition () Delete CEO WOLFINGER, WILLIAM E Name: Name: Address: Address: 5113 INVERNESS DRIVE City-St-Zip: City-St-Zip: SARASOTA, FL 34243

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: W E WOLFINGER CEO 09/20/2004