FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 26 PM 4:07

DOCUMENT # P18884 (7)

1. Corporation Name
CURATIVE TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
14 RESEARCH WAY SETAUKET NY 11733	14 RESEARCH WAY SETAUKET NY 11733

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/19/1988
3a. Date of Last Report: 02/03/1994

2. Principal Place of Business 21
2a. Mailing Address 26
Suite, Apt. #, etc. 22 / 27
City & State 23 / 28
Zip 24 / Country 25 / Zip 29 / Country 30

4. FEI Number: 41-1503914 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	DIRECTOR	☐ Change XX Addition
NAME	WHITMAN, RUSSELL B.	1.2 NAME	MOUFFLET, GERARD	
STREET ADDRESS	14 RESEARCH WAY	1.3 STREET ADDRESS	101 FEDERAL STREET	
CITY-ST-ZIP	SETAUKET NY	1.4 CITY-ST-ZIP	BOSTON, MA 02109	
TITLE	SD	2.1 TITLE	PD	☐ Change XX Addition
NAME	MAULDIN, TIMOTHY	2.2 NAME	VAKOUTIS, JOHN	
STREET ADDRESS	9900 BREN RD E STE 421	2.3 STREET ADDRESS	14 RESEARCH WAY	
CITY-ST-ZIP	MINNETONKA MN	2.4 CITY-ST-ZIP	E. SETAUKET, NY 11733	
TITLE	D	3.1 TITLE	VP	☐ Change XX Addition
NAME	STUESSER, LAWRENCE	3.2 NAME	GLEBER, CAROL	
STREET ADDRESS	41 PLYMPTON RD	3.3 STREET ADDRESS	1901 N. CENTRAL: SUITE 200	
CITY-ST-ZIP	SUDBURY MA	3.4 CITY-ST-ZIP	RICHARDSON, TX 75080	
TITLE	AS	4.1 TITLE	EVP	☐ Change XX Addition
NAME	PRIOR, JOHN	4.2 NAME	JONES, HOWARD	
STREET ADDRESS	14 RESEARCH WAY	4.3 STREET ADDRESS	14 RESEARCH WAY	
CITY-ST-ZIP	SETAUKET NY	4.4 CITY-ST-ZIP	E. SETAUKET, NY 11733	
TITLE	~~V~~	5.1 TITLE		☐ Change ☐ Addition
NAME	~~KELLEHER, KATHLEEN~~	5.2 NAME		
STREET ADDRESS	~~14 RESEARCH WAY~~	5.3 STREET ADDRESS		
CITY-ST-ZIP	~~SETAUKET NY~~	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE	DIRECTOR	☐ Change XX Addition
NAME	HOFF, LAWRENCE	6.2 NAME	CANET, GERARDO	
STREET ADDRESS	4161 BRONSON BLVD	6.3 STREET ADDRESS	500 W. PUTNAM AVENUE	
CITY-ST-ZIP	KALAMAZOO MI	6.4 CITY-ST-ZIP	GREENWICH, CT 06830-6079	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 1/22/95 (561)649-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0476780 FP