2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P20440

1. Entity Name

BIO-MEDICAL APPLICATIONS HOME DIALYSIS SERVICES, INC.



Principal Place of Business

Mailing Address

95 HAYDEN AVE LEXINGTON, MA 02420 US ATTENTION: TAX DEPT., 95 HAYDEN AVENUE LEXINGTON, MA 02420 US

FILED 05 MAR 29 AN 10: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA



03042005

No Chg-P

CR2E034 (10/03)

4. FEI Number 04-3017194

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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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	il applicable. (NOTE: Registe	red Agent signature	required when reinstating)	DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RUMA, JOSEPH 95 HAYDEN AVE LEXINGTON, MA 02420			-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT COLANTONIO, PAUL 95 HAYDEN AVE LEXINGTON, MA 02420			300050012103 04/06/0501047001 **3250.00 DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT LIEBERMAN, MARC 95 HAYDEN AVE LEXINGTON, MA 02420					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOUGLAS G KOTT 95 HAYDEN AVE LEXINGTON, MA 02420					
TITLE NAME STREET ADORESS CITY-ST-ZIP	VP RONALD J KUERBITZ 95 HAYDEN AVE LEXINGTON, MA 02420					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WAHLSTROM, MATS A 95 HAYDEN AVENUE LEXINGTON, MA 02420					
12. I hereby o	certify that the information supplied with this fi	ling does not qualify for the ex	emption state	d 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul Colantonio

3/18/05

Date

781-402-9000

Daytime Phone #

BIO-MEDICAL APPLICATIONS HOME DIALYSIS SERVICES, INC.

FEIN 04-3017194

LIST OF OFFICERS AND DIRECTORS EFFECTIVE 03/17/03

DIRECTORS	OFFICE	BUSINESS
MATS WAHLSTROM	DIRECTOR	95 HAYDEN AVENUE LEXINGTON, MA 02420
OFFICERS	OFFICE	BUSINESS
MATS WAHLSTROM	PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
RONALD J. KUERBITZ	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
ROBERT MCGORTY	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
JOSEPH J. RUMA	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARK FAWCETT	TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
PAUL J. COLANTONIO	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARC S. LIEBERMAN	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
DOUGLAS G. KOTT	SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420
DEBORAH CASEY	ASSISTANT SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420