## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000009077

Entity Name: HEALTHSCIENCE INCORPORATED

FILED May 07, 2004 Secretary of State

Entity Na	me: HEALTH	SCIENCE, INCORPORATED			
Current Principal Place of Business:			New Principal Place of Business:		
	AMPAWOOD	PORATE BLVD LAND CORPORATE CENTER			
Current Mailing Address:			New Mailing Address:		
	TYBER, RN TTLE CREEK L 33624	RD			
FEI Number	: 59-3493248	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
14505 NET TAMPA, F	TYBER, RNE TTLE CREEK L 33624 US named entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATOR		nic Signature of Registered Age	ent	Date	
Election Car		03(2)(b), F.S., the corporation did no g Trust Fund Contribution(). CTORS:	·	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RAFORD, LINI	ER MOUNTAIN RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RAFORD, PAU	PA 4630 WOODLAND CORP BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LINDA RAFORD VP 05/07/2004