

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075510

Entity Name: ENZYMEDICA, INC.

FILED  
Apr 08, 2005  
Secretary of State

## Current Principal Place of Business:

1625 W. MARION AVE.  
#14  
PUNTA GORDA, FL 33950 US

## Current Mailing Address:

1625 W. MARION AVE.  
#14  
PUNTA GORDA, FL 33950 US

## New Principal Place of Business:

395 COMMERCIAL COURT  
SUITE C  
VENICE, FL 34292 US

## New Mailing Address:

395 COMMERCIAL COURT  
SUITE C  
VENICE, FL 34292 US

FEI Number: 65-0859937

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEI FINANCIAL SERVICES, INC.  
5348 DREW ROAD  
VENICE, FL 34293 US

## Name and Address of New Registered Agent:

BOHAGER, THOMAS PTD  
410 SALVADOR DR  
PUNTA GORDA, FL 33983 US

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.

SIGNATURE: THOMAS BOHAGER

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: BOHAGER, THOMAS G  
Address: 410 JSALVADOR DR.  
City-St-Zip: PUNTA GORDA, FL 33983

Title: SVD ( ) Delete  
Name: DESTEFANO, LOU  
Address: 3210 SW 14TH PL  
City-St-Zip: BOYNTON BEACH, FL 33426

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS BOHAGER

PTD

04/08/2005

Electronic Signature of Signing Officer or Director

Date