

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 03, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # F98000000300**

1. Entity Name  
**PROFUNDUS HOLDINGS, INC.**



Principal Place of Business  
**ATTN: EDWARD TANENBAUM  
90 PARK AVENUE  
NEW YORK, NY 10016**

Mailing Address  
**ATTN: EDWARD TANENBAUM  
90 PARK AVENUE  
NEW YORK, NY 10016**

**DO NOT WRITE IN THIS SPACE**



01222004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**13-3140621**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE  
IN THIS SPACE**

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD TANENBAUM, EDWARD 90 PARK AVENUE NEW YORK, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D POHL, TIMOTHEUS PHA 24 WEST 55TH ST NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY - ST - ZIP	F BAUMBACH, ERICH VON BELZERSTRASSE 9 D55216 INGELHEIM AM RHEIN, GE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HUBER, GERHARD BOEHRINGER INGELHEIM GMBH, BINGER STR 173 INGELHEIM, GE 55216
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEPEL, JENS VON AUDLEY FARM-P.O. BOX 510 RT 7 BERRYVILLE, VA 22611
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000031876  
02/04/04-80166-013 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #