2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K39350

Entity Name: OCUCARE SYSTEMS, INC.

FILED Sep 30, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9040 W ST RD 84

FT LAUDERDALE, FL 33324 US

Current Mailing Address: New Mailing Address:

9040 W ST RD 84

FT LAUDERDALE, FL 33324 US

FEI Number: 65-0094759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVIS, JOHN R. CT CORPORATION SYSTEM
9040 W ST RD 84 1200 SOUTH PINE ISLAND ROAD
FT LAUDERDALE, FL 33324 US PLANTATION, FL 33324 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: ANNE BOUTILIER 09/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 DAVIS, JOHN R
 Name:
 WALLS, CHRISTOPHER J

 Address:
 9040 W SR 84
 Address:
 87 GRANDVIEW AVENUE

 City-St-Zip:
 FT LAUDERDALE, FL 33324
 City-St-Zip:
 WATERBURY, CT 06708

 Title:
 VD
 () Delete
 Title:
 TD
 (X) Change () Addition

 Name:
 STEAD, GREG
 Name:
 BLASKIEWICZ, WILLIAM A

Address: 9040 W SR 84 Address: 87 GRANDVIEW AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33324 City-St-Zip: WATERBURY, CT 06708

Title: () Delete Title: SD () Change (X) Addition

 Name:
 Name:
 HARROLD, JASON M

 Address:
 Address:
 112 ZEBULON COURT

 City-St-Zip:
 City-St-Zip:
 ROCKY MOUNT, NC 27804

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: WILLIAM A. BLASKIEWICZ TD 09/30/2004