

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007046

FILED  
Feb 27, 2007  
Secretary of State

Entity Name: CHROMADEx, INC.

**Current Principal Place of Business:**

2952 S. DAIMLER STREET  
SANTA ANA, CA 92705

**New Principal Place of Business:**

**Current Mailing Address:**

2952 S. DAIMLER STREET  
SANTA ANA, CA 92705

**New Mailing Address:**

FEI Number: 33-0880006

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAKARA, TOM  
13161 56TH CT STE 201  
CLEARWATER, FL 33760 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: JAKSCH, FRANK JR  
Address: 2952 S. DAIMLEN ST  
City-St-Zip: SANTA ANA, CA 92705

Title: VCS ( ) Delete  
Name: GERMAIN, MARK  
Address: 2952 S. DAIMLER STREET  
City-St-Zip: SANTA ANA, CA 92705

Title: D ( ) Delete  
Name: JAKSCH, KEVIN  
Address: 2952 S. DAIMLER STREET  
City-St-Zip: SANTA ANA, CA 92705

Title: SEC ( ) Delete  
Name: VARVARO, TOM  
Address: 2952 S. DAIMLER STREET  
City-St-Zip: SANTA ANA, CA 92705

Title: D ( ) Delete  
Name: DUNKERLEY, HUGH  
Address: 2952 S. DAIMLER STREET  
City-St-Zip: SANTA ANA, CA 92705

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 Chapter 119, 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 C VARVARO

SEC

02/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date