

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000608

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: ADAMIS LABORATORIES, INC.

## Current Principal Place of Business:

3848 FAU BLVD  
SUITE 100  
BOCA RATON, FL 33431

## New Principal Place of Business:

4911 LYONS TECHNOLOGY PKWY  
STE 17  
COCONUT CREEK, FL 33073

## Current Mailing Address:

3848 FAU BLVD  
SUITE 100  
BOCA RATON, FL 33431

## New Mailing Address:

4911 LYONS TECHNOLOGY PKWY  
STE 17  
COCONUT CREEK, FL 33073

FEI Number: 20-3604105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAEI BERNARD  
3848 FAU BLVD  
SUITE 100  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

ALOI, RICHARD L PRES.  
4911 LYONS TECHNOLOGY PKWY,  
STE 17  
COCONUT CREEK, FL 33073 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: RICHARD L. ALOI

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP (X) Delete  
Name: FROST, RICAHRD  
Address: 3848 FAU BLVD SUITE 100  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: ALOI, RICAHRD  
Address: 3848 FAU BLVD SUITE 100  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: PARKER, THOMAS C  
Address: 3848 FAU BLVD SUITE 100  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: ALOI, RICAHRD  
Address: 4911 LYONS TECHNOLOGY PKWY, STE 17  
City-St-Zip: COCONUT CREEK, FL 33073

Title: D (X) Change ( ) Addition  
Name: PARKER, THOMAS C  
Address: 4911 LYONS TECHNOLOGY PKWY, STE 17  
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD L. ALOI

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date