2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20289

FILED Jul 06, 2005 Secretary of State

Entity Name: INTERNATIONAL ASSOCIATION FOR RESEARCH ON EPSTEIN-BARR VIRUS AND ASSOCIATED

DISEASES, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O NANCY RAAB-TRAUB 325 LINEBERGER CB #7295 CHAPEL HILL, NC 275997295 US

Current Mailing Address:

FEI Number: 59-2821283

New Mailing Address:

C/O NANCY RAAB-TRAUB 325 LINEBERGER CB #7295 CHAPEL HILL, NC 275997295 US

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LAU, RAYMOND Y 10900 ROOSEVELT BLVD. NORTH ST. PETERSBURG, FL 33716

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

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MILLER, GEORGE WANG, FRED Name: Name:

222 CEDAR ST., YALE SCHOOL OF MEDICINE Address: 181 LONGWOOD AVE Address:

City-St-Zip: NEW HAVEN, CT City-St-Zip: BOSTON, MA 02467

Title: () Delete Title: (X) Change () Addition ERNBERG, INGEMAR Name: Name: ZENG, YI-XIN

Address: KAROLINSKA INSTITUTE Address: 651 DONG FEN RD City-St-Zip: STOCKHOLM, SW City-St-Zip: GUANGZHOU, GD 5100060 CH

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

FARREL, PAUL Name: SCULLEY, TOM Name:

LUDWIG INST., NORFOLD PLACE, PADDINGTON 300 HERSTON RD Address: Address: City-St-Zip: LONDON W21PG, UK City-St-Zip: BRISBANE, Q 4029 AU

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

RAAB-TRAUB, NANCY Name: Name: RAAB-TRAUB, NANCY

UNIVERSITY IF NC AT CHAPEL HILL Address: Address: UNIVERSITY IF NC AT CHAPEL HILL City-St-Zip: CHAPEL HILL, NC City-St-Zip: CHAPEL HILL, NC 275997295 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY RAAB-TRAUB Т 07/06/2005