

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000023587

FILED
Jan 14, 2008
Secretary of State

Entity Name: MORHAIM PHARMALAB, INC.

Current Principal Place of Business:

7335 NW 56TH ST
MIAMI, FL 331664203 US

New Principal Place of Business:

6990 NW 82ND AVE
MIAMI, FL 331662765 US

Current Mailing Address:

7335 NW 56TH ST
MIAMI, FL 331664203 US

New Mailing Address:

6990 NW 82ND AVE
MIAMI, FL 331662765 US

FEI Number: 01-0621560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE QUIROZ, WILSCE S
7891 WEST FLAGLER ST
575
MIAMI, FL 33144 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: P () Delete
Name: DE QUIROZ, WILSCE S
Address: 7891 WEST FLAGLER ST #575
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: WILSCE S DE QUIROZ

PRES

01/14/2008

Electronic Signature of Signing Officer or Director

_____ Date