

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069050

Entity Name: PHARMACONOMICS, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

6000 METROWEST BOULEVARD
SUITE #203
ORLANDO, FL 32835

New Principal Place of Business:

1390 LEGENDARY BLVD
CLERMONT, FL 34711

Current Mailing Address:

6000 METROWEST BOULEVARD
SUITE #203
ORLANDO, FL 32835

New Mailing Address:

1390 LEGENDARY BLVD
CLERMONT, FL 34711

FEI Number: 04-3700531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ACTIVE FILINGS LLC
10651 NE 11 COURT
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

MANDELL, ELLIOTT R
1390 LEGENDARY BLVD
CLERMONT, FL 34711 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: ELLIOTT R. MANDELL

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: MANDELL, ELLIOTT R
Address: 2151 CAIRNS COURT
City-St-Zip: ORLANDO, FL 32835

Title: DC () Delete
Name: TAO, DAVID G
Address: 2439 ROAT DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: DV () Delete
Name: CARTER, RODNEY E
Address: 7670 MILANO DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: DS (X) Delete
Name: MANDELL, GINGER L
Address: 2151CAIRNS COURT
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: MANDELL, ELLIOTT R
Address: 1390 LEGENDARY BLVD
City-St-Zip: CLERMONT, FL 34711

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

Title: DSV (X) Change () Addition
Name: MANDELL, GINGER L
Address: 1390 LEGENDARY BLVD
City-St-Zip: CLERMONT, FL 34711

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: ELLIOTT R. MANDELL

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date