2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081204

City-St-Zip:

MANOTICK, ONTARIO K4B 1B3,

FILED Jul 05, 2007 Secretary of State

Entity Name: KALYX BIOSCIENCES, INC. **Current Principal Place of Business: New Principal Place of Business:** 7603 CURRENCY DRIVE ORLANDO, FL 32809 **Current Mailing Address: New Mailing Address:** 7603 CURRENCY DRIVE ORLANDO, FL 32809 FEI Number: 20-3149760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MEIJER, ROBERT 10439 FLAT LAKE ROAD 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MEIJER, ROBERT Name: Name: 10439 FLAT LAKE ROAD Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: MOORE, GERALD Name: MOORE, GERALD 123 HUNTMARDR 268 RIDGESIDE FARM DRIVE Address: Address: SITTSVILLE ONTARIO K2S 1B9, KANATA, ON K2W 1H2 CA City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ROBERTS, JEFF Name: Name: 6516 MARINE DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: ROBERT MEIJER D 07/05/2007