

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 06, 2004 8:00 am**  
**Secretary of State**

04-06-2004 90029 017 \*\*\*150.00

**DOCUMENT # F01000004484**

1. Entity Name

ZLB BIOPLASMA INC.



Principal Place of Business

801 NORTH BRAND BOULEVARD  
SUITE 1150  
GLENDALE CA 91203  
US

Mailing Address

5201 CONGRESS AVE  
SUITE 220  
BOCA RATON FL 33487  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

74-2967974

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME TURNER, PETER  
STREET ADDRESS WANKDORFSTRASSE 10  
CITY-ST-ZIP CH-3000 BERN 22 SW

TITLE S ☐ Delete  
NAME TURVEY, PETER  
STREET ADDRESS 45 POPLAR ROAK  
CITY-ST-ZIP PARKVILLE, VICTORIA, AUSTRALIA

TITLE TD ☐ Delete  
NAME CIPA, ANTONI  
STREET ADDRESS 45 POPLAR ROAK  
CITY-ST-ZIP PARKVILLE, VICTORIA, AUSTRALIA

TITLE D ☐ Delete  
NAME WOOD, JACK  
STREET ADDRESS 45 POPLAR ROAK  
CITY-ST-ZIP PARKVILLE, VICTORIA, AUSTRALIA

TITLE D ☐ Delete  
NAME MCNAMEE, BRIAN  
STREET ADDRESS 45 POPLAR ROAK  
CITY-ST-ZIP PARKVILLE, VICTORIA, AUSTRALIA

TITLE AS ☐ Delete  
NAME BOSS, GREGORY  
STREET ADDRESS 801 N BRAND BLVD SUITE 1150  
CITY-ST-ZIP GLENDALE CA 91203

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Assistant Secretary* 3/26/04