

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 651698

FILED
Jun 08, 2005
Secretary of State

Entity Name: CLINICAL PHARMACOLOGY INTERNATIONAL, INC.

Current Principal Place of Business:

2060 N.W. 22ND AVENUE
MIAMI, FL 33142

New Principal Place of Business:

11190 BISCAYNE BOULEVARD
NORTH MIAMI, FL 33181

Current Mailing Address:

2060 N.W. 22ND AVENUE
MIAMI, FL 33142

New Mailing Address:

11190 BISCAYNE BOULEVARD
NORTH MIAMI, FL 33181

FEI Number: 59-1951936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAMBLEN, EARLE
2060 N W 22ND AVE
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

HARRIS CRAMER LLP
1555 PALM BEACH LAKES BOULEVARD
310
WEST PALM BEACH, FL 33401 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: MICHAEL D. HARRIS

06/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHAMBLEN, EARLE
Address: 2060 N W 22ND AVE
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: LASSETER, KENNETH C
Address: 2060 NW 22ND AVE.
City-St-Zip: MIAMI, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KRINSKY, LISA
Address: 11190 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI, FL 33181

Title: DCEO (X) Change () Addition
Name: HANTMAN, ARNOLD
Address: 11190 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI, FL 33181

Title: EVP () Change (X) Addition
Name: HOLMES, GREGORY
Address: 11190 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI, FL 33181

Title: CFO () Change (X) Addition
Name: NATAN, DAVID
Address: 11190 BISCAYNE BOULEVARD
City-St-Zip: NORHT MIAMI, FL 33181

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

SIGNATURE: DAVID NATAN

CFO

06/08/2005

Electronic Signature of Signing Officer or Director

Date