2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2005
Secretary of State

DOCUMENT# 754082

Entity Name: LIFE ENERGIES RESEARCH INSTITUTE,INC

Current Principal Place of Business:

<UNUSED>
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

2510 INAGUA AVENUE
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 59-2027925 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAPLAN, MR. JOSEPH H., ESQ.
1951 NORTHWEST 17TH AVENUE
MIAMI, FL 33125 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GILULA, MARSHALL F,
Address: 2510 INAGUA AVENUE
City-St-Zip: MIAMI, FL

Title: STD ( ) Delete
Name: NAMON, RICHARD
Address: 5555 OAKWOOD LN
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete
Name: KAPLAN, JOSEPH H.,
Address: 1951 NW 17TH AVENUE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GILULA, MARSHALL F,
Address: 2510 INAGUA AVENUE
City-St-Zip: MIAMI, FL 33133

Title: STD (X) Change ( ) Addition
Name: NAMON, RICHARD
Address: 5555 OAKWOOD LN
City-St-Zip: CORAL GABLES, FL 33156

Title: D (X) Change ( ) Addition
Name: KAPLAN, JOSEPH H
Address: 1951 NW 17TH AVENUE
City-St-Zip: MIAMI, FL 33125

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

SIGNATURE: MARSHALL F. GILULA, M.D. PD 07/08/2005

Electronic Signature of Signing Officer or Director — Date