2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002738

Entity Name: SINOFRESH LABORATORIES, INC.

FILED Jul 09, 2004 Secretary of State

313 SEABOARD AVE. 516 PAUL MORRIS DRIVE VENICE, FL 34929 ENGLEWOOD, FL 34223

Current Mailing Address: New Mailing Address:

313 SEABOARD AVE. 516 PAUL MORRIS DRIVE VENICE, FL 34929 ENGLEWOOD, FL 34223

FEI Number: 58-2572494 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FUST, CHARLES A
313 SEABOARD AVE.
VENICE, FL 34929

FUST, CHARLES A
516 PAUL MORRIS DRIVE
ENGLEWOOD, FL 34223

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: 07/09/2004

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: CPT () Delete Title: CEO (X) Change () Addition
Name: FUST, CHARLES A Name: FUST, CHARLES A
Address: 150 CRESTVIEW DR Address: 516 PAUL MORRIS DRIVE
Office St. Zing FINCLE MOOD, EL. 24222

City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223

Title: VV () Delete Title: D (X) Change () Addition

Name:ELKOURIE, JOSEPHName:ELKOURIE, JOSEPHAddress:917 FORREST POND DRIVEAddress:516 PAUL MORRIS DRIVECity-St-Zip:MARIETTA, GA 30068City-St-Zip:ENGLEWOOD, FL 34223

Title: D () Delete Title: D (X) Change () Addition Name: CONNOR, ROBERT Name: DUPONT, PAUL R

Address: 1771 INDEPENDENCE COURT SUITE 1 Address: 516 PAUL MORRIS DRIVE
City-St-Zip: BIRMINGHAM, FL 35216 City-St-Zip: ENGLEWOOD, FL 34223

Title: S () Delete Title: D (X) Change () Addition

 Name:
 DEMING, LEIGHTON
 Name:
 MALONEY-FUST, STÄCEY

 Address:
 6470 E. JOHNS CROSSING SUITE 440
 Address:
 516 PAUL MORRIS DRIVE

 City-St-Zip:
 DULUTH, GA 30097
 City-St-Zip:
 ENGLEWOOD, FL 34223

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: CHARLES A. FUST CEO 07/09/2004