

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004827

FILED
Feb 09, 2007
Secretary of State

Entity Name: EQUIMUNE RESEARCH CORP.

Current Principal Place of Business:

12508 W ATLANTIC BLVD
CORAL SPRINGS, FL 33071

New Principal Place of Business:

12518 W ATLANTIC BLVD
CORAL SPRINGS, FL 33071

Current Mailing Address:

12508 W ATLANTIC BLVD
CORAL SPRINGS, FL 33071

New Mailing Address:

12518 W ATLANTIC BLVD
CORAL SPRINGS, FL 33071

FEI Number: 52-2375345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCUS, JOEL
676 WEST PROSPECT ROAD
FT. LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: HUNT, LARRY
Address: 1761 NW 127TH WAY
City-St-Zip: CORAL SPRINGS, FL

Title: S () Delete
Name: DOUGLAS, C.J
Address: 6608 LOST HORIZON DR
City-St-Zip: AUSTIN, TX 78759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CJ DOUGLAS

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02/09/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date