

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002985

Entity Name: DOR BIOPHARMA, INC.

FILED
Jul 06, 2004
Secretary of State

Current Principal Place of Business:

28101 N. BALLARD DRIVE, UNIT F
LAKE FOREST, IL 60045

New Principal Place of Business:

1691 MICHIGAN AVE
SUITE 435
MIAMI, FL 33139 US

Current Mailing Address:

28101 N. BALLARD DRIVE, UNIT F
LAKE FOREST, IL 60045

New Mailing Address:

1691 MICHIGAN
SUITE 435
MIAMI, FL 33139 US

FEI Number: 41-1505029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: ELLISON, RALPH M
Address: 28101 N. BALLARD DRIVE, UNIT F
City-St-Zip: LAKE FOREST, IL 60045

Title: V () Delete
Name: BREY, RICHARD
Address: 28101 N. BALLARD DRIVE, UNIT F
City-St-Zip: LAKE FOREST, IL 60045

Title: ST () Delete
Name: MILLING, WILLIAM
Address: 28101 N. BALLARD DRIVE, UNIT F
City-St-Zip: LAKE FOREST, IL 60045

Title: CD () Delete
Name: HAIG, ALEXANDER M JR.
Address: 4301 N. FAIRFAX DRIVE, SUITE 300
City-St-Zip: ARLINGTON, VA 22203

Title: D () Delete
Name: KANZER, STEVE H JD, CPA
Address: 801 BRICKELL AVENUE, SUITE 900
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: KORNBLUTH, ARTHUR A MD
Address: 1751 YORK AVENUE
City-St-Zip: NEW YORK, NY 10128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: ELLISON, RALPH M
Address: 1691 MICHIGAN
City-St-Zip: MIAMI, FL 33139 US

Title: CSO (X) Change () Addition
Name: BREY, RICHARD
Address: 1691 MICHIGAN
City-St-Zip: MIAMI, FL 33139

Title: ST (X) Change () Addition
Name: MILLING, WILLIAM
Address: 1691 MICHIGAN AVE
City-St-Zip: MIAMI, FL 33139 US

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

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 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: WILLIAM MILLING

ST

07/06/2004

Electronic Signature of Signing Officer or Director

Date