

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002985

Entity Name: DOR BIOPHARMA, INC.

FILED
Nov 18, 2004
Secretary of State

Current Principal Place of Business:

1691 MICHIGAN AVE
SUITE 435
MIAMI, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1691 MICHIGAN
SUITE 435
MIAMI, FL 33139 US

New Mailing Address:

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:

CLAVIJO, JAMES
1691 MICHIGAN AVE SUITE 435
MIAMI, FL 33139 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: JAMES CLAVIJO

11/18/2004

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:

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

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

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

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 (X) 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: MYRIANTHOPOULOS, EVAN
Address: 1691 MICHIGAN SUITE 435
City-St-Zip: MIAMI, FL 33139 US

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

Title: TREA (X) Change () Addition
Name: CLAVIJO, JAMES
Address: 1691 MICHIGAN AVE SUITE 435
City-St-Zip: MIAMI, FL 33139 US

Title: CBOD (X) Change () Addition
Name: HAIG, ALEXANDER P
Address: 1691 MICHIGAN AVE SUITE 435
City-St-Zip: MIAMI, FL 33139 US

Title: BOD (X) Change () Addition
Name: KANZER, STEVE H JD, CPA
Address: 1691 MICHIGAN AVE SUITE 435
City-St-Zip: MIAMI, FL 33139

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: JAMES CLAVIJO

TREA

11/18/2004

Electronic Signature of Signing Officer or Director

Date