

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000649

FILED  
Apr 06, 2007  
Secretary of State

Entity Name: HUMAN HEALTH PROJECT INC.

## Current Principal Place of Business:

479 RUSTIC DR.  
LOS ANGELES, CA 90065

## New Principal Place of Business:

## Current Mailing Address:

479 RUSTIC DR.  
LOS ANGELES, CA 90065

## New Mailing Address:

FEI Number: 71-0891805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICHARDS, JINNI  
3208 NE 8TH CT.  
POMPANO BEACH, FL 33062 US

## Name and Address of New Registered Agent:

MERCEREAU, KAREN  
701 CHANCELLAR DRIVE  
LUTZ, FL 33548 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: KAREN MERCEREAU

04/06/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CPST ( ) Delete  
Name: HARRINGTON, PHILIP  
Address: 479 RUSTIC DR.  
City-St-Zip: LOS ANGELES, CA 90065

Title: VC ( ) Delete  
Name: NEVEY, MARK  
Address: 8081 HARDING AVE., STE. 101  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: TRAUB, DAVID  
Address: 50 WOOD SIDE PLAZA, STE. 601  
City-St-Zip: REDWOOD CITY, CA 94061

Title: D ( ) Delete  
Name: CLARKE, MURRAY  
Address: 1821 WILSHIRE BLVD., STE. 400  
City-St-Zip: SANTA MONICA, CA 90403

Title: V ( ) Delete  
Name: RICHARDS, JINNI  
Address: 3208 NE 8TH CT.  
City-St-Zip: POMPANO BEACH, FL 33062

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VC (X) Change ( ) Addition  
Name: NEVEU, MARK  
Address: 8081 HARDING AVE., STE. 101  
City-St-Zip: MIAMI BEACH, FL 33141

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

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

Title: V (X) Change ( ) Addition  
Name: MERCEREAU, KAREN  
Address: 701 CHANCELLAR DRIVE  
City-St-Zip: LUTZ, FL 33548

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

SIGNATURE: PHILIP P HARRINGTON

CEO

04/06/2007

Electronic Signature of Signing Officer or Director

Date