2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 16, 2011
Secretary of State

DOCUMENT# F06000006697

Entity Name: CRUCELL BIOLOGICS, INC.

Current Principal Place of Business:

4216 PONCE DE LEON BLVD
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4216 PONCE DE LEON BLVD
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-5701173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: C
Name: BRUS, RONALD
Address: ARCHIMEDESWEG 4, 2333 CN LEIDEN
City-St-Zip: THE NETHERLANDS, OC

Title: D
Name: KRUIMER, LEONARD
Address: ARCHIMEDESWEG 4, 2333 CN LEIDEN
City-St-Zip: THE NETHERLANDS, OC

Title: D
Name: BEUKEMA, REINDER K
Address: ARCHIMEDESWEG 4, 2333 CN LEIDEN
City-St-Zip: THE NETHERLANDS, OC

Title: P
Name: MURAI, JR., ANDRES
Address: 4216 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33146 US

Title: VP
Name: PON, DOUGLAS
Address: 4216 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33146 US

I hereby 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 all other like empowered.

SIGNATURE: ANDRES MURAI JR. P 06/16/2011

Electronic Signature of Signing Officer or Director Date