2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2007
Secretary of State

DOCUMENT# F06000007287

Entity Name: SOLAPHARM, INC.

Current Principal Place of Business:

1000 SOUTH PINE ISLAND RD.
SUITE 230
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

1000 SOUTH PINE ISLAND RD.
SUITE 230
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 20-4659790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOLOMON, LAWRENCE
1000 SOUTH PINE ISLAND RD.
SUITE 230
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: CHRM ( ) Delete
Name: SOLOMON, LAWRENCE
Address: 1000 SOUTH PINE ISLAND RD.SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: CEOT ( ) Delete
Name: SOLOMON, LAWRENCE
Address: 1000 SOUTH PINE ISLAND RD.SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete
Name: HAHM, ELLIOT
Address: 1000 SOUTH PINE ISLAND RD.SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: V ( ) Delete
Name: GREEN, GEOFF
Address: 1000 SOUTH PINE ISLAND RD.SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change ( ) Addition
Name: SOLOMON, LAWRENCE
Address: 1000 SOUTH PINE ISLAND RD., SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: CEOD (X) Change ( ) Addition
Name: SOLOMON, LAWRENCE
Address: 1000 SOUTH PINE ISLAND RD., SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: D (X) Change ( ) Addition
Name: NORTON, NIGEL
Address: 1000 SOUTH PINE ISLAND RD.,SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: V (X) Change ( ) Addition
Name: GREEN, GEOFF
Address: 1000 SOUTH PINE ISLAND RD.,SUITE 230
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Change (X) Addition
Name: LUCKING, DAVID
Address: 1000 S. PINE ISLAND ROAD, SUITE 230
City-St-Zip: PLANTATION, FL 33324 US

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: LAWRENCE SOLOMON CHRM 01/30/2007

Electronic Signature of Signing Officer or Director — Date