

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000649

Entity Name: INNOTHERA AMERICAS, INC.

FILED
Apr 15, 2008
Secretary of State

Current Principal Place of Business:

C/O NARIXIS PRAMEX INTERNATIONAL
1251 AVENUE OF THE AMERICAS, 34TH FLR
NEW YORK, NY 10020

New Principal Place of Business:

C/O NATIXIS PRAMEX INTERNATIONAL
1251 AVENUE OF THE AMERICAS, 34TH FLR
NEW YORK, NY 10020

Current Mailing Address:

C/O NARIXIS PRAMEX INTERNATIONAL
1251 AVENUE OF THE AMERICAS, 34TH FLR
NEW YORK, NY 10020

New Mailing Address:

C/O NATIXIS PRAMEX INTERNATIONAL
1251 AVENUE OF THE AMERICAS, 34TH FLR
NEW YORK, NY 10020

FEI Number: 20-8208228

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 323012525 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: C () Delete
Name: GOBET, ARNAUD
Address: 2 RUE DE BUENOS AIRES
City-St-Zip: 75007 PARIS FRANCE, OC

Title: D () Delete
Name: CHEVILLARD, FRANCOIS
Address: 1 SQUARE BUGEAND
City-St-Zip: 78150 LE CHESNAY FRANCE, OC

Title: DP () Delete
Name: PIN, JEROME
Address: 406 NAVARRE AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: S () Delete
Name: WEST, JAMES
Address: 10 FUNSTON PLACE
City-St-Zip: NUTLEY, NJ 07110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JAMES WEST

S

04/15/2008

Electronic Signature of Signing Officer or Director

Date