## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered

CLAUDE

SIGNATURE:

## Secretary of State DOCUMENT # F07000004905 02-19-2008 90017 021 \*\*\*150.00 1. Entity Name PARINGENIX, INC. Principal Place of Business Mailing Address 40027549 1792 BELL TOWER LANE 1792 BELL TOWER LANE WESTON, FL 33326 WESTON, FL 33326 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 02112008 Chg-P City & State City & State Applied For 4. FEI Number 41-2035780 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BERTRAND, CLAUDE Street Address (P.O. Box Number is Not Acceptable) 1792 BELL-TOWER LANE WESTON, FL 33326 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PCEO1 TITLE Delete TITLE Change Addition MARCÚS, STEPHEN G NAME . NAME STREET ADDRESS 1792 BELL TOWER LANE STREET ADDRESS WESTON, FL 33326 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MARCUS, STEPHEN G NAME NAME STREET ADDRESS 1792 BELL TOWER LANE STREET ADDRESS CITY-ST-ZIP WESTON, FL 33326 CITY-ST-7IP Delete TITLE TITLE ☐ Change Addition NAME JOHNSON, GREGORY NAME STREET ADDRESS 1792 BELL TOWER LANE STREET ADDRESS WESTON, FL 33326 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition KROEGER, CHRISTOPHER NAME NAME STREET ADDRESS 1792 BELL TOWER LANE STREET ADDRESS CETY-ST-7IP WESTON, FL 33326 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME ARLEDGE, TERESA NAME STREET ADDRESS 1792 BELL TOWER LANE STREET ADDRESS WESTON, FL 33326 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change . TITLE NAME BERTRAND, CLAUDE NAME 1792 BELL TOWER LANE STREET ADDRESS STREET ADDRESS WESTON, FL 33326 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

FILED Feb 19, 2008 8:00 am