

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000536

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: VETCELL BIOSCIENCE, INC.

**Current Principal Place of Business:**

101 NE THIRD AVENUE  
SUITE 1500  
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

101 NE THIRD AVENUE  
SUITE 1500  
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 33-1150263      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHAFFER, JEFFREY  
101 NE THIRD AVENUE  
SUITE 1500  
FT. LAUDERDALE, FL 33301 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: GARRELL, GREG M  
Address: MULBERRY HOUSE, 31 MARKET STREET  
City-St-Zip: FORDHAM, GAMBS CB75LQ ENGLAN,

Title: VCHR ( ) Delete  
Name: MOUNTFORD, DAVID  
Address: MULBERRY HOUSE, 31 MARKET STREET  
City-St-Zip: FORDHAM, GAMBS CB75LQ ENGLAN,

Title: STD ( ) Delete  
Name: DOOLEY, JON  
Address: MULBERRY HOUSE, 31 MARKET STREET  
City-St-Zip: FORDHAM, GAMBS CB75LQ ENGLAN,

Title: V ( ) Delete  
Name: SCHAFFER, JEFFREY DR.  
Address: 101 NE THIRD AVE. SUITE 1500  
City-St-Zip: FORT LAUDERDALE, FL 33301

**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: JEFFREY SCHAFFER

V

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date