2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006483

Entity Name: QUICK-MED TECHNOLOGIES, INC.

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
3427 SW 42 WAY GAINESVILLE, FL 32608			
Current Mailing Address:		New Mailing Address:	
401 NE 25TH TERRACE BOCA RATON, FL 33431			
FEI Number: 65-0797243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
LERNER, DAVID 401 NE 25TH TERRACE BOCA RATON, FL 33431 US			
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			Date
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete LERNER, DAVID 401 NE 25TH TERRACE BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	C () Delete GRANITO, MICHAEL 30 E 37TH STREET NEW YORK, NY 10016	Title: Name: Address: City-St-Zip:	C (X) Change () Addition GRANITO, MICHAEL 1088 SHADY AVE PITTSBURGH, PA 15232
Title: Name: Address: City-St-Zip:	C () Delete GRANITO, MICHAEL 1088 SHADY AVE PITTSBURGH, PA 15232	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GREGORY, SCHULTZ 832 NW 45 TERRACE GAINESVILLE, FL 32605
Title: Name: Address: City-St-Zip:	D () Delete CERJAN, PAUL 3524 OLD COURSE LANE VALRICO, FL 33594	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VD () Delete OLDERMAN, JERRY 17 AIKMAN DRIVE BEDFORD, MA 01730	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition OLDERMAN, JERRY 17 PICKMAN DRIVE BEDFORD, MA 01730
Title: Name: Address: City-St-Zip:	D () Delete FRIEL, GEORGE RR2, BOX 69 BUCKEYE, WV 24924	Title: Name: Address: City-St-Zip:	()Change ()Addition
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			

SIGNATURE: NAM H. NGUYEN CFO 04/24/2007

above, or on an attachment with an address, with all other like empowered.