2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006483

Entity Name: QUICK-MED TECHNOLOGIES, INC.

FILED Mar 08, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3427 SW 42 WAY GAINESVILLE, FL 32608				902 NW 4TH STREET GAINESVILLE, FL 32601			
Current Mailing Address:				New Mailing Address:			
401 NE 25TH TERRACE BOCA RATON, FL 33431				160 W CAMINO REAL 238 BOCA RATON, FL 33432			
FEI Number:	65-0797243	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	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				NGUYEN, NAM H 160 W CAMINO REAL 238 BOCA RATON, FL 33432 US			
The above in the State	named entity ຣເ of Florida.	bmits this statement for the pu	rpose of	f changing it	s registered of	fice or registered a	gent, or both,
SIGNATURE: NAM H. NGUYEN				03/08/2008			
	paign Financing	Signature of Registered Agen Trust Fund Contribution ().	ι	ADDITION	CICHANGES	Date	D DIDECTORS.
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () E LERNER, DAVID 401 NE 25TH TEI BOCA RATON, FI			Title: Name: Address: City-St-Zip:	CEOD (X) GREENO, J. LAI 363 MATTISON I CONCORD, MA	DRIVE	
Title: Name: Address: City-St-Zip:	C () E GRANITO, MICHA 1088 SHADY AVE PITTSBURGH, PA			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E GREGORY, SCH 832 NW 45 TERF GAINESVILLE, F	RACE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () C CERJAN, PAUL 3524 OLD COUR VALRICO, FL 33			Title: Name: Address: City-St-Zip:	D (X) CAFFREY, RICH 3658 RT 44 P C BROWNSVILLE,	BOX 319	
Title: Name: Address: City-St-Zip:	VD () E OLDERMAN, JEF 17 PICKMAN DR BEDFORD, MA	VE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E FRIEL, GEORGE RR2, BOX 69 BUCKEYE, WV 2			Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: NAM H. NGUYEN CFO 03/08/2008