2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005553

Entity Name: CRYOBANKS INTERNATIONAL, INC.

FILED Mar 12, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
270 SOUTH NORTH LAKE BLVD., STE 1012 ALTAMONTE SPRINGS, FL 32701				270 SOUTH NORTH LAKE BLVD., STE 1000 ALTAMONTE SPRINGS, FL 32701			
Current Mailing Address:				New Mailing Address:			
270 SOUTH NORTH LAKE BLVD., STE 1012 ALTAMONTE SPRINGS, FL 32701				270 SOUTH NORTH LAKE BLVD., STE 1000 ALTAMONTE SPRINGS, FL 32701			
FEI Number:	59-3310005	FEI Number Applied For()	FEI Nun	nber Not Appl	icable ()	Certificate of Statu	s Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
270 SOUTH ALTAMON1 The above i	TE SPRINGS,	KE BLVD STE 1000	purpose o	f changing il	ts registered offi	ce or registered	agent, or both,
in the State	of Florida.				•	-	-
SIGNATUR		is Cianatura of Dogistarad As				Dete	
Election Com		ric Signature of Registered Ag	gent			Date	
Election Cam	paign Financini	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	BRUNOEHLER 270 SOUTH NO	Delete , DWIGHT PRTH LAKE BLVD STE 1000 PRINGS, FL 32701		Title: Name: Address: City-St-Zip:	() C	Change () Addition	
Title: Name: Address: City-St-Zip:	KAZI, ZUBAIR 270 SOUTH NO	Delete PRTH LAKE BLVD STE 1000 PRINGS, FL 32701		Title: Name: Address: City-St-Zip:	() C	Change () Addition	
Title: Name: Address: City-St-Zip:	BURGER, ALAN 270 SOUTH NO	Delete N PRTH LAKE BLVD STE. 1012 PRINGS, FL 32701		Title: Name: Address: City-St-Zip:	SIDDIQUE, OSMA	TH LAKE BLVD ST	E. 1000
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	() C	Change () Addition	
Title: Name: Address: City-St-Zip:	HERRERA, AND 270 SOUTH NO) Delete GEL PRTH LAKE BLVD STE. 1012 PRINGS, FL 32701		Title: Name: Address: City-St-Zip:	() C	Change () Addition	
Title: Name: Address: City-St-Zip:	LEDERMAN, SA 270 SOUTH NO) Delete ANFORD MD IRTH LAKE BLVD STE. 1012 PRINGS, FL 32701		Title: Name: Address: City-St-Zip:	()0	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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DWIGHT BRUNOEHLER

CEO 03/12/2007