2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002524

Name:

Address:

City-St-Zip:

FILED Apr 29, 2005 Secretary of State

Entity Na	ame: UNITED	STATES BLOOD BANK, INC.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
8355 NW MIAMI, FL	12TH ST 33126				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
8355 NW MIAMI, FL	12TH ST. 33126				
FEI Numbe	r: 65-0909938	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
PALMER, 147 ALHA CORAL G	, H. C III AMBRA CIR., S BABLES, FL 33	TE. 210 3134 US			
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its regist	tered office or registered agent, or both,	
SIGNATL	JRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	ampaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	P (MONTOTO, LU 1181 NW 123			(X) Change()Addition , ARMANDO .W.12TH ST.	

City-St-Zip: MIAMI, FL 33182 City-St-Zip: MIAMI, FL 33126 () Delete Title: () Change () Addition

SOTOLONGO, ENRIQUE Name: 21 RUE DIJON Address: KENNER, LA 70065 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ENRIQUE SOTOLONGO STD 04/29/2005