

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G33311

FILED
Jun 30, 2005
Secretary of State

Entity Name: ADVANCED BIOMEDICAL RESEARCH, INC.

Current Principal Place of Business:

5116 LONGFELLOW AVE
TAMPA, FL 33629 US

New Principal Place of Business:

101 E KENNEDY BLVD
4130
TAMPA, FL 33602 US

Current Mailing Address:

P.O. BOX 10338
TAMPA, FL 33679 US

New Mailing Address:

FEI Number: 59-2894338 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIKMAN, EDWARD A
101 E KENNEDY BLVD
SUITE 4130
TAMPA, FL 33602 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EIKMAN, EDWARD A.,
Address: 5116 LONGFELLOW AVENUE
City-St-Zip: TAMPA, FL

Title: T () Delete
Name: EIKMAN, E. ALLAN
Address: 549 SUWANEE CIR
City-St-Zip: TAMP, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: EIKMAN, E. ALLAN
Address: 463 LUCERNE AVE
City-St-Zip: TAMP, FL 33606

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: /ALLANEIKMAN/

Electronic Signature of Signing Officer or Director

T

06/30/2005

_____ Date