2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 04, 2007
Secretary of State

DOCUMENT# L03000052589

Entity Name: HYBRID PHARMACEUTICAL, LLC

Current Principal Place of Business:

975 IMPERIAL GOLF COURSE BOULEVARD
32
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 562
SAUGATUCK, MI 49453

New Mailing Address:

FEI Number: 20-0478742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PANTELLERIA, SHAWN T
975 IMPERIAL GOLF COURSE BOULEVARD #32
103
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

PANTELLERIA, SHAWN T
975 IMPERIAL GOLF COURSE BOULEVARD #32
32
NAPLES, FL 34110 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: _____ 09/04/2007
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: PANTELLERIA, SHAWN T
Address: 975 IMPERIAL GOLF COURSE BOULEVARD #32
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES:

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHAWN T. PANTELLERIA MGR 09/04/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date