

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014123

Entity Name: MOBILE APHERESIS, INC.

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

5730 SW 166 AVE.  
FT. LAUDERDALE, FL 33331

## New Principal Place of Business:

## Current Mailing Address:

4839 SW 148 AVENUE  
#442  
DAVIE, FL 33330

## New Mailing Address:

FEI Number: 65-0977830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELLISON, DEBRA M  
5730 SW 166 AVE.  
FT. LAUDERDALE, FL 33331 US

## Name and Address of New Registered Agent:

MANTEL ELLISON, DEBRA  
5730 SW 166 AVE.  
FT. LAUDERDALE, FL 33331 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: DEBRA MANTEL ELLISON

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: ELLISON, DEBRA M  
Address: 5730 SW 166 AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33331

Title: MGR ( ) Delete  
Name: ELLISON, RANDY C  
Address: 5730 SW 166TH AVE  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: MGR (X) Delete  
Name: WYNKOOP, JOHN L  
Address: 2250 OAK CT  
City-St-Zip: PEMBROKE, FL 33026

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: DEBRA MANTEL ELLISON

MGR

03/20/2009

Electronic Signature of Signing Officer or Director

Date