

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014432

FILED
Apr 19, 2007
Secretary of State

Entity Name: SENOMATRIX INC.

Current Principal Place of Business:

1720 HARRISON STREET
SUITE 1805
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

PO BOX 6
HOLLYWOOD, FL 33022

New Mailing Address:

FEI Number: 65-1104796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUTLER, MARK F
1720 HARRISON STREET
SUITE 1805
HOLLYWOOD, FL 33020 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BUTLER, MARK F
Address: 1720 HARRISON STREET- SUITE 1805
City-St-Zip: HOLLYWOOD, FL 33020

Title: P () Delete
Name: KREMER, KLAUS
Address: 1250 E. HALLANDALE BEACH BLVD., #901
City-St-Zip: HALLANDALE, FL 33009

Title: T () Delete
Name: HABDAFNICK, JUANITA
Address: 1250 E. HALLANDALE BEACH BLVD., #901
City-St-Zip: HALLANDALE, FL 33009

Title: VP () Delete
Name: JACKISH, PETER
Address: 1250 E. HALLANDALE BEACH BLVD., #901
City-St-Zip: HALLANDALE, FL 33009

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:

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

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: MARK F. BUTLER

S

04/19/2007

Electronic Signature of Signing Officer or Director

_____ Date