2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2001 8:00 am
Secretary of State
07-25-2001 90006 005 ***550.00

DOCUMENT # P00000038230

1. Entity Name
CYTOREX BIOSCIENCES, INC.

Principal Place of Business	Mailing Address
~~4239 SABAL RIDGE CIRCLE~~ ~~WESTON FL 33331~~	~~4239 SABAL RIDGE CIRCLE~~ ~~WESTON FL 33331~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8222 Wilds Road	7700 NW 79 Place
Suite, Apt. #, etc.	Suite, Apt. #, etc. D-1
City & State: Coral Springs, FL	City & State: Miami, FL
Zip: 33067 Country: USA	Zip: 33166 Country: USA.

4. FEI Number 65-1007796 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~GARCIA, CARLOS M~~ ~~4239 SABAL RIDGE CIRCLE~~ ~~WESTON FL 33331~~	Name: CARLOS M. GARCIA, CDO Street Address (P.O. Box Number is Not Acceptable): 7700 NW 79 Place No D-1 City: Miami FL Zip Code: 33166

8. 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. (SAME)

SIGNATURE _____ CARLOS M. GARCIA 07-14-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After September 12, 2001 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RODRIGUEZ, HERNANDO 4239 SABAL RIDGE CIRCLE WESTON FL 33331	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MARTUCCI, DAVID 4239 SABAL RIDGE CIRCLE WESTON FL 33331	☐ Delete	President - CEO - Director MARTUCCI DAVID 7700 NW 79 Place No D-1 Miami, FL 33166	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JIMENEZ, WILLIAM 4239 SABAL RIDGE CIRCLE WESTON FL 33331	☐ Delete	Vice President - Treasurer Director Jimenez, William 7700 NW 79 Place No D-1 Miami, FL 33166	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GARCIA, CARLOS M 4239 SABAL RIDGE CIRCLE WESTON FL 33331	☐ Delete	~~SD~~ Secretary - Director GARCIA, CARLOS M. 7700 NW 79 Place No D-1 Miami, FL 33166	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (5/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED _____ 07-14-01 (305)218-1991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CARLOS M. GARCIA