2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 12, 2009
Secretary of State

DOCUMENT# P00000038281

Entity Name: APICAL PHARMACEUTICAL CORPORATION

Current Principal Place of Business:

1401 E. BROWARD BLVD., #206
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

1401 E. BROWARD BLVD., #206
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-1058533 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERMAN, BRUCE
1401 E. BROWARD BLVD.
#206
FT. LAUDERDALE, FL 33301 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BAMFORD, BILL
Address: 1401 E BROWARD BLVD #206
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D ( ) Change (X) Addition
Name: PLANTE, JR, PAUL R
Address: 1401 E BROWARD BLVD #206
City-St-Zip: FORT LAUDERDALE, FL 33301

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: BILL BAMFORD D 10/12/2009

Electronic Signature of Signing Officer or Director Date