2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P01000000978

Entity Name: SINOFRESH HEALTHCARE, INC.

Current Principal Place of Business:

787 COMMERCE DR.
SUITE #6
VENICE, FL 34292

New Principal Place of Business:

333 S. TAMIAMI TRAIL
SUITE 285
VENICE, FL 34285

Current Mailing Address:

787 COMMERCE DR.
SUITE #6
VENICE, FL 34292

New Mailing Address:

333 S. TAMIAMI TRAIL
SUITE 285
VENICE, FL 34285

FEI Number: 65-1082270 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHARLES, FUST A
787 COMMERCE DRIVE
SUITE 6
VENICE, FL 34292 US

Name and Address of New Registered Agent:

CHARLES, FUST A
333 S. TAMIAMI TRAIL
SUITE 285
VENICE, FL 34285 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: _____ 04/29/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	COB	( ) Delete
Name:	FUST, CHARLES	
Address:	787 COMMERCE DRIVE, SUITE 6	
City-St-Zip:	VENICE, FL 34292	
Title:	CEO	( ) Delete
Name:	FUST, CHARLES	
Address:	787 COMMERCE DRIVE, SUITE 6	
City-St-Zip:	VENICE, FL 34292	
Title:	D	( ) Delete
Name:	FITZGERALD, THOMAS	
Address:	4 ST. ANDREWS HILL	
City-St-Zip:	PITTSFORD, NY 14534	
Title:	DS	( ) Delete
Name:	OTTO, DAVID M	
Address:	900 4TH AVENUE SUITE 3140	
City-St-Zip:	SEATTLE, WA 98164	
Title:	D	( ) Delete
Name:	AZIZI, RAZEK	
Address:	6160 STONERIDGE MALL RD SUITE 270	
City-St-Zip:	PLEASANTON, CA 94588	
Title:	D	( ) Delete
Name:	TERRY, RITTER	
Address:	6160 STONERIDGE MALL RD SUITE 270	
City-St-Zip:	PLEASANTON, CA 94588	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	COB	(X) Change ( ) Addition
Name:	FUST, CHARLES	
Address:	333 S. TAMIAMI TRAIL SUITE# 285	
City-St-Zip:	VENICE, FL 34285	
Title:	CEO	(X) Change ( ) Addition
Name:	FUST, CHARLES	
Address:	333 S. TAMIAMI TRAIL SUITE #285	
City-St-Zip:	VENICE, FL 34285	
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 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: CHARLES FUST COB 04/29/2009
Electronic Signature of Signing Officer or Director — Date