

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000053780

**FILED**  
**Apr 02, 2009**  
**Secretary of State****Entity Name:** ACCU-BREAK PHARMACEUTICALS, INC.**Current Principal Place of Business:**1000 S PINE ISLAND RD SUITE 230  
PLANTATION, FL 33324 US**New Principal Place of Business:****Current Mailing Address:**1000 S PINE ISLAND RD SUITE 230  
PLANTATION, FL 33324 US**New Mailing Address:****FEI Number:** 01-0584817**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GOLDFARB, ROBI  
1000 S. PINE ISLAND ROAD  
SUITE 230  
PLANTATION, FL 33324 US**Name and Address of New Registered Agent:**GOLDFARB, ROBERT I  
1000 S. PINE ISLAND ROAD  
SUITE 230  
PLANTATION, FL 33324 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: ROBERT I. GOLDFARB

04/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D CH ( ) Delete  
Name: HAHN, ELLIOT F  
Address: 1000 S PINE ISLAND RD, STE 230  
City-St-Zip: PLANTATION, FL 33324 US

Title: DCEO ( ) Delete  
Name: KAPLAN, ALLAN S  
Address: 1000 S PINE ISLAND RD, STE 230  
City-St-Zip: PLANTATION, FL 33324 US

Title: D VP ( ) Delete  
Name: LUCKING, DAVID  
Address: 1000 S PINE ISLAND RD, #230  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete  
Name: NORTON, NIGEL N  
Address: 1000 S. PINE ISLAND ROAD, #230  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete  
Name: SOLOMON, LAWRENCE  
Address: 1000 S. PINE ISLAND ROAD, #230  
City-St-Zip: PLANTATION, FL 33324

Title: VP ( ) Delete  
Name: GREEN, GEOFF  
Address: 1000 S. PINE ISLAND ROAD, #230  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P (X) Change ( ) Addition  
Name: GOLDFARB, ROBERT I  
Address: 1000 S PINE ISLAND RD, STE 230  
City-St-Zip: PLANTATION, FL 33324 US

Title: D (X) Change ( ) Addition  
Name: KAPLAN, ALLAN S  
Address: 1000 S PINE ISLAND RD, #230  
City-St-Zip: PLANTATION, FL 33324

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

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

Title: D VP (X) Change ( ) Addition  
Name: LUCKING, DAVID  
Address: 1000 S. PINE ISLAND ROAD, #230  
City-St-Zip: PLANTATION, FL 33324

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: ROBERT I. GOLDFARB

PRES

04/02/2009

Electronic Signature of Signing Officer or Director

Date