2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075350

Entity Name: ADVANCED NUTRITIONAL BIOSYSTEMS, INC.

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8034 SUNPORT DRIVE SUITE 401 ORLANDO, FL 32809

New Mailing Address: Current Mailing Address:

PO BOX 532079 2655 LE JEUNE RD. 303 GEORGE DEPOZSGAY ORLANDO, FL 328532079 CORAL GABLES, FL 33134

FEI Number: 59-3743377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALAVI, SIAMACK P DEPOZSGAY, GEORGE ESQ. 8034 SUNPORT DR SUITE 401 2655 LE JEUNE RD. ORLANDO, FL 32809 303 CORAL GABLES, FL 33134 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.

Title:

SIGNATURE: GEORGE DEPOZSGAY 02/13/2007

> Electronic Signature of Registered Agent Date

> > Title:

SECY

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition ALAVI, SIA-MACK BELA, GERENDELY Name: Name: PO BOX 533736 COLOMBUS U. 29 Address: Address:

BUDAPEST, HU 1145 HU City-St-Zip: ORLANDO, FL 32853 City-St-Zip:

() Change (X) Addition Name: Name: BELA, GERENDELY COLOMBUS U. 29 Address: Address: BUDAPEST, HU 1145 HU City-St-Zip: City-St-Zip:

Title: TRE. Title: () Delete () Change (X) Addition

BELA, GERENDELY Name: Name: COLOMBUS U. 29 Address Address: City-St-Zip: City-St-Zip: BUDAPEST, HU 1145 HU

Title: () Delete Title: DIR. () Change (X) Addition

BELA, GERENDELY Name: Name: Address: Address: COLOMBUS U. 29 City-St-Zip: City-St-Zip: BUDAPEST, HU 1145 HU

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: BELA GERENDELY **PRES** 02/13/2007