2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000088520

Entity Name: JIANGBO PHARMACEUTICALS, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
LAIYANG (CITY, YANTAI	NGMAO STREET, AREA A I, SHANDONG PROVINCE DF CHINA, CH 710075			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
LAIYANG (CITY, YANTAI	NGMAO STREET, AREA A I, SHANDONG PROVINCE DF CHINA, CH 710075			
FEI Number:	: 65-1130026	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
WESTON, The above	AL GROVE W FL 33327 named entity	US	ourpose of changing its registere	d office or registered agent, or both,	
	e of Florida. 				
SIGNATU					
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SUNG, ELSA) Delete S ROAD, SUITE 420 , FL 33434	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CAO, WUBO) Delete S ROAD, SUITE 420 , FL 33434	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	XU, HAIBO) Delete S ROAD, SUITE 420 , FL 33434	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ARBOLEDA, R	ROAD, SUITE 420	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CAIN, ROBER	ROAD, SUITE 420	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ELSA SUNG CFO 04/30/2009