2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2005
Secretary of State

DOCUMENT# P02000087590

Entity Name: TRACE MINERAL BIOTECHNOLOGY, INC.

Current Principal Place of Business:

610 SW 22ND ROAD
MIAMI, FL 33129

New Principal Place of Business:

1550 PLASENTIA AVE
CORAL GABLES, FL 33134

Current Mailing Address:

610 SW 22ND ROAD
MIAMI, FL 33129

New Mailing Address:

1550 PLASENTIA AVE
CORAL GABLES, FL 33134

FEI Number: 30-0103050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORTELEZZI, CARLOS
610 SW 22ND ROAD
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

CORTELEZZI, CARLOS
1550 PLASENTIA AVE
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.

SIGNATURE: CARLOS CORTELEZZI 09/13/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: CORTELEZZI, CARLOS
Address: 610 SW 22ND ROAD
City-St-Zip: MIAMI, FL 33129

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: CORTELEZZI, CARLOS
Address: 1550 PLASENTIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: VP ( ) Change (X) Addition
Name: ARABENA, HECTOR R
Address: 1550 PLASENTIA AVE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS CORTELEZZI PSD 09/13/2005
Electronic Signature of Signing Officer or Director Date