2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073470

City-St-Zip: GAINESVILLE, FL 32601

Entity Name: SABINE NEUROTECHNOLOGY, INC.

FILED Apr 07, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1110 NE 3 GAINESVI	RD ST LLE, FL 32601			201 SE 2ND PLACE SUITE 201-B GAINESVILLE, FL 32601	l US	
Current Mailing Address:				New Mailing Address:		
1110 NE 3 GAINESVI	RD ST LLE, FL 32601			201 SE 2ND PLACE SUITE 201-B GAINESVILLE, FL 32601	l US	
FEI Number:	: 20-1207527	FEI Number Applied For ()	FEI Nui	mber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
618 NE 1S GAINESVI The above	LLE, FL 32601 named entity se of Florida.	US	purpose o	of changing its registered o	ffice or registered agent, or both,	
Electronic Signature of Registered Agent					Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () OSTER, DORAN 1425 NW 35TH GAINESVILLE,	TERRACE		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	VSTD () ALLEN, RICHAF 1110 NE 3RD S			Title: () Name: Address:	Change () Addition	

City-St-Zip:

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: STEPHANIE WARRINGTON VSTD 04/07/2005