2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P04000094929

Entity Name: CORD:USE CORD BLOOD BANK, INC.

Current Principal Place of Business:

1800 PEMBROOK DR.
SUITE 300
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

1800 PEMBROOK DR.
SUITE 300
ORLANDO, FL 32810 US

New Mailing Address:

FEI Number: 11-3723078 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ERNST, MICHAEL T
1627 ELIZABETH'S WALK
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: GUINDI, EDWARD S M.D.
Address: 2190 TERRACE BLVD.
City-St-Zip: LONGWOOD, FL 32779 US

Title: CFO ( ) Delete
Name: ERNST, MICHAEL T
Address: 1627 ELIZABETH'S WALK
City-St-Zip: WINTER PARK, FL 32789

Title: DIRE ( ) Delete
Name: BECHTEL, CAROLYN
Address: 80 CENTRAL PARK WEST, #10C
City-St-Zip: NEW YORK, NY 10023 US

Title: DIRE ( ) Delete
Name: WARREN, JOSEPH III
Address: 201 S. COLLEGE STREET, SUITE 2300
City-St-Zip: CHARLOTTE, NC 28244 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MICHAEL T. ERNST CFO 04/30/2008

Electronic Signature of Signing Officer or Director — Date