2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 27, 2007 0

ANNUAL REPORT				_	Mar 2/, 200/ 08:00 A			
DOCUMENT # P05000099017 1. Entity Name UNISON PHARMACEUTICALS, INC.					S	ecretary	y of State	
Principal Plac 2272 W 78T HIALEAH, FL		Mailing Address 1500 E. HILLSBORO BLVD. SUITE 110 DEERFIELD BEACH, FL 33441						
D	O NOT WRITE	CE	03232007 4. FEI Numb 20-448	No Chg-P	CR2E034 (11	Applied For Not Applicable 5 Additional		
STE 110	6. Name and Address of Current Rev N, ROGER LSBORO BLVD LD BEACH, FL 33441	DO NOT WRITE IN THIS SPACE						
the obligat	named entity submits this statement for the lons of registered agent. Signature, typed or printed name of registered agent and the now. The name of registered agent and the now.		d Agent signature require			DATE 15:805.74 -90009-005		
	D HAMPTON, ROGER 1500 E HILLSBORO BLVD - STE 1: DEERFIELD BEACH, FL 33441 D GONZALEZ, MARCOS 2272 W 78TH ST HIALEAH, FL 33016		Ad		NOT W	RITE		
NAME STREET ADDRESS CITY-ST-DIP THE NAME STREET ADDRESS CITY-ST-ZIP								

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions confained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

TITLE
MAME
STREET ADDRESS
CITY-ST-ZIP

SCHATURE AND TYPED ORTHORITED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-07

Date

Daytime Phone #