2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000140780

Entity Name: DR. KOFFER NEW YORK INC

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15873 MARCELLO CIRCLE 7946 FOUNDERS CIRCLE NAPLES, FL 34110 NAPLES, FL 34114

Current Mailing Address: New Mailing Address:

15873 MARCELLO CIRCLE 3887 MANNIX DRIVE NAPLES, FL 34110 SUITE 623

NAPLES, FL 34114 US

FEI Number: 20-5856980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAURA OLSZEWSKI & ASSOCIATES, PA TARASEVICH, IOURI 5401 TAYLOR RD, SUITE 3 7946 FOUNDERS CIRCLE NAPLES, FL 34109 NAPLES, FL 34114

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: IOURI TARASEVICH 03/04/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition SAPOZHNIKOV, MICHAEL SAPOZHNIKOV, MICHAEL Name: 15873 MARCELLO CIRCLE 7946 FOUNDERS CIRCLE Address: Address: NAPLES, FL 34114 US City-St-Zip: NAPLES, FL 34110 US City-St-Zip:

Title: VΡ Title: VΡ (X) Change () Addition () Delete TARASEVICH, IOURI TARASEVICH, IOURI Name: Name:

15873 MARCELLO CIRCLE 7946 FOUNDERS CIRCLE Address: Address: NAPLES, FL 34110 US NAPLES, FL 34114 US City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition Name:

BABARIKA, ALEXANDER BABARIKA, ALEXANDER Name: 15873 MARCELLO CIRCLE 7946 FOUNDERS CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34110 US City-St-Zip: NAPLES, FL 34114 US

Title: () Delete Title: (X) Change () Addition

CHAN, ANDY CHAN, ANDY Name: Name:

7946 FOUNDERS CIRCLE Address: 15873 MARCELLO CIRCLE Address: City-St-Zip: NAPLES, FL 34110 US City-St-Zip: NAPLES, FL 34114 US

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.

VΡ SIGNATURE: IOURI TARASEVICH 03/04/2009