## P06000144169

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations					
SUBIE	SUBJECT: Ling-Chiou Pharmaceuticals, Inc.					
SUBJE	(Name of Corporation	n)				
DOCU	MENT NUMBER: P06000144169					
The end	closed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:						
	Perry D. Monioudis, Esq.					
(Name of Contact Person)						
COHN & MONIOUDIS, P.A.						
(Firm/Company)						
800 SE Third Avenue, Suite 200 (Address)						
Ft. Lauderdale, Florida 33316 (City/State and Zip Code)						
For further information concerning this matter, please call:						
Perry [	D. Monioudis, Esq. at (99) (Name of Contact Person)	54 523-8787 rea Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (8/05)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organiz r to change its registered office or register	zed under the laws of the State of _	FLORIDA	
1. The name of	he corporation: Ling-Chiou Pharmaceutic	als, Inc.		
2. The principal Davie, Florid	office address: 2930 Hidden Hollow Lane da 33328			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: November 15, 200	Document number: P060001	44169	
	I street address of the current registered ag timent of State:	ent and registered office on file wit	h the	
	Pamela J. Anselmo, Esq.		_	
3111 Stirling Road				
	Ft. Lauderdale, Florida 33312		7 S	
6. The name and (if changed):	2006 DEC 11 RECRETAS			
	Perry D. Monioudis, Esq.		SEE. THE	
	800 SE Third Avenue, Suite 200	)	3: 49 FLORID	
	(P.O. Box NOT acceptable)  Ft. Lauderdale, Florida 33316		8F 5	
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its	s registered agent,	
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an ified in writing of the change.	officer so	
(Signay)	erre of an officer or director)	Huston Powell, President (Printed or typed name and t	itle)	
I further agree of my duties, an document is bei	the appointment as registered agent and to comply with the provisions of all statu d I am familiar with and accept the obli- ng filed merely to reflect a change in the s been notified in writing of this change.	l agree to act in this capacity. Ites relative to the proper and com gation of my position as registered registered office address, I hereb	plete performance I agent. Or, if this by confirm that the	
James	Musualli	November 30, 2006		
	gnature of Registered Agent)	(Date)		
It signing on be	half of an entity:			
	Typed or Printed Name)			
	* * * FILING FE	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)