

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000118658

Entity Name: ALLIED BIOMED INC

FILED
Nov 22, 2009
Secretary of State**Current Principal Place of Business:**1407 OAKFIELD DRIVE
BRANDON, FL 33511**New Principal Place of Business:****Current Mailing Address:**1791 BOBTAIL DRIVE
MAITLAND, FL 32751**New Mailing Address:**

FEI Number: 26-1338175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MURTAZA, ARSHIYA
1791 BOBTAIL DRIVE
MAITLAND, FL 32751 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**OFFICERS AND DIRECTORS:**Title: MR () Delete
Name: RAZA, MEHDI
Address: 1791 BOBTAIL DRIVE
City-St-Zip: MAITLAND, FL 32751**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: MRS (X) Change () Addition
Name: MURTAZA, ARSHIYA
Address: 1791 BOBTAIL DRIVE
City-St-Zip: MAITLAND, FL 32751

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: ARSHIYA MURTAZA

MRS

11/22/2009

Electronic Signature of Signing Officer or Director_____
Date