

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000128296

Entity Name: CYROKINETICS, INC.

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

17663 NW 87 PLACE  
HIALEAH, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

17663 NW 87 PLACE  
HIALEAH, FL 33018

**New Mailing Address:**

FEI Number: 26-1513101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPOTE, JOSE  
17663 NW 87 PLACE  
HIALEAH, FL 33018 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: D  
Name: CAPOTE, JOSE  
Address: 17663 NW 87 PLACE  
City-St-Zip: HIALEAH, FL 33018

I hereby 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 all other like empowered.

SIGNATURE: JOSE CAPOTE

D

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date