2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2010
Secretary of State

DOCUMENT# P08000026971

Entity Name: PHARMAX RESEARCH CLINIC, INC.

Current Principal Place of Business:

7200 NW 7TH ST
STE 350
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

7200 NW 7TH ST
STE 350
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 20-5821020 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, ARMANDO G
7200 NW 7TH ST
STE 350
MIAMI, FL 33126 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: ROUSSEAU, ROGER MD
Address: 7200 NW 7TH ST. STE 350
City-St-Zip: MIAMI, FL 33126 US

Title: DC
Name: HERNANDEZ, ISABEL
Address: 7200 NW 7TH ST. STE 350
City-St-Zip: MIAMI, FL 33126 US

Title: D
Name: ACOSTA, GIRALDO
Address: 7200 NW 7TH ST. STE 350
City-St-Zip: MIAMI, FL 33126 US

Title: D
Name: HERNANDEZ, ARMANDO G
Address: 7200 NW 7TH ST. STE 350
City-St-Zip: MIAMI, FL 33126 US

Title: D
Name: ISLA, ANDRES
Address: 7200 NW 7TH ST. STE 350
City-St-Zip: MIAMI, FL 33126 US

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: ARMANDO G HERNANDEZ D 03/22/2010

Electronic Signature of Signing Officer or Director Date