2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071059

Entity Name: INMUNO VITAL, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13605 SW 149 AVE UNIT 3 MIAMI, FL 33196

Current Mailing Address: New Mailing Address:

13605 SW 149 AVE UNIT 3 MIAMI, FL 33196

FEI Number: 65-0442324 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:

BACKUS, DEXTER M.
2100 CORAL GATE DRIVE
MIAMI, FL 33145 US

BACKUS, DEXTER M
2100 CORAL GATE DRIVE
MIAMI, FL 33145 US

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: DEXTER M BACKUS 04/30/2008

Electronic Signature of Registered Agent Date

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

MIAMI, FL 33186

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DELRAY BEACH, FL 33483 US

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

 Name:
 BACKUS, DEXTER M
 Name:
 BACKUS, DEXTER M

 Address:
 2100 CORAL GATE DRIVE
 Address:
 2100 CORAL GATE DRIVE

City-St-Zip: MIAMI, FL 33145 City-St-Zip: MIAMI, FL 33145 US

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

 Name:
 JACOBS, PATRICIA
 Name:
 JACOBS, PATRICIA

 Address:
 10920 SW 134 CT
 Address:
 831 LAKE AVENUE NORTH

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

Name: RUIZ, JULIO

 Name.
 Name.
 ROIZ, 30ElO

 Address:
 Address:
 2100 CORAL GATE DRIVE

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33145 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.

SIGNATURE: DEXTER M BACKUS P 04/30/2008