

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000075573

1. Entity Name

IMMUNO-RX, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90116 029 ***150.00

Principal Place of Business

Mailing Address

1401 MANATEE AVE. W.
SUITE 1020
BRANDENTON FL 34205

1401 MANATEE AVE. W.
SUITE 1020
BRANDENTON FL 34205-6768

2. Principal Place of Business

6731 15th Ave. N.

3. Mailing Address

6731 15th Ave. N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
St. Petersburg, FL 33710

City & State
St. Petersburg, FL 33710

4. FEI Number 65-0467068

Applied For
Not Applicable

Zip Country
33710 U.S.A.

Zip Country
33710 U.S.A.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required-

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~KINSOLVING, C R PHD~~
~~802 11TH STREET W~~
~~BRANDENTON FL 34205~~

Name
Blalock, Landers, Walters & Vogler, P.A.
Street Address (P.O. Box Number is Not Acceptable)
802 11th St. W.

City Zip Code
Bradenton FL 34205

8. 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

Signature, typed or printed name of registered agent and time applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/22/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME GOLDBERG, STEPHEN R
STREET ADDRESS 1401 MANATEE AVE W. 1020
CITY-ST-ZIP BRANDENTON FL 34205

TITLE CEO/S/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 6731 15th Ave. N.
CITY-ST-ZIP St. Petersburg, FL 33710

TITLE T ☐ Delete
NAME HADDEN, JOHN W II
STREET ADDRESS 575 LEXINGTON AVE 410
CITY-ST-ZIP NEW YORK NY 10022

TITLE VP/T/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 140 W. 57th St. #9-C
CITY-ST-ZIP New York, NY 10019

TITLE CD ☐ Delete
NAME HADDEN, JOHN W MD
STREET ADDRESS 2413 BAYSHORE BLVD 2105
CITY-ST-ZIP TAMPA FL 33629

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 428 Harbor Rd.
CITY-ST-ZIP Cold Spring Harbor, NY 11724

TITLE D ☒ Delete
NAME WILLIAMS, H.R.
STREET ADDRESS 7813 BROADMOOR PINES BLVD
CITY-ST-ZIP SARASOTA FL 34243

TITLE P/D ☐ Change ☒ Addition
NAME Brandwein, Harvey J.
STREET ADDRESS 140 W. 57th St. #9-C
CITY-ST-ZIP New York, NY 10019

TITLE D ☒ Delete
NAME CASHILL, KAREN M
STREET ADDRESS 6347 KAHANA WAY
CITY-ST-ZIP SARASOTA FL 34241

TITLE D ☐ Change ☒ Addition
NAME Wolf, Larry
STREET ADDRESS 24600 Center Ridge Rd., 285
CITY-ST-ZIP Westlake, OH 44145

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stephen R. Goldberg, Chief Executive Officer

3/22/00 727/302-9666

Date

Daytime Phone #

CR2E034 (9/99)