2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000071115

FILED Feb 05, 2007 Secretary of State

Entity Name: SOUTHERN BIOMEDICAL RESEARCH INSTITUTE, INC.

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	AMBRA CIRCLE ABLES, FL 33146	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	AMBRA CIRCLE ABLES, FL 33146	US			
FEI Number:	65-0526968 FI	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	ASON R AMBRA CIRCLE ABLES, FL 33146	US			
	named entity subr of Florida.	nits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic S	ignature of Registered Age	ent	Date	
Election Can	npaign Financing Tru	st Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Dele HANFT, JASON R 7000 SW 62 AVE #3 SOUTH MIAMI, FL	10	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Dele LANDSMAN, ADAM 2100 LINCOLN PAR CHICAGO, IL 60614	K WEST APT 7A NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON R. HANFT PRES 02/05/2007