2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2007
Secretary of State

DOCUMENT# P96000038384

Entity Name: CITI PHARMACEUTICALS, INC.

Current Principal Place of Business:

7340 SW 48TH #101
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

7340 SW 48TH #101
#101
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 65-0664151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MANUEL, FRIAS J
7340 SW 48 STREET
101
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

FRIAS, JOSE M
7340 SW 48 STREET
101
MIAMI, FL 33155 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: JOSE M FRIAS 06/21/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FRIAS, JOSE M
Address: 7340 SW 48TH ST #101
City-St-Zip: MIAMI, FL 33155

Title: S ( ) Delete
Name: ALVAREZ, SUSANA
Address: 7340 SW 48 ST
City-St-Zip: MIAMI, FL 33155

Title: T ( ) Delete
Name: CALVO, RAMIRO
Address: 7340 SW 48 ST
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SUSANA ALVAREZ S 06/21/2007
Electronic Signature of Signing Officer or Director Date