2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000031623

Entity Name: ALLERGY RESEARCH GROUP, INC.

FILED Mar 28, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
30806 SANTANA ST. HAYWARD, CA 94544 Current Mailing Address:				2300 NORTH LOOP ROAD ALAMEDA, CA 94502 New Mailing Address:		
			New Mailii			
30806 SANTANA ST. HAYWARD, CA 94544			2300 NORTH LOOP ROAD ALAMEDA, CA 94502			
FEI Number	: 13-3940486	FEI Number Applied For()	FEI Number Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address of N	New Registered Agent:	
4521 PGA	ATE CREATIO BLVD #211 ACH GARDEN	NS ENTERPRISES, INC. S, FL 33418 US				
	named entity e of Florida.	submits this statement for the	purpose of changing it	s registered o	office or registered agent, or both,	
SIGNATU	RE:					
		nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	DCEO (LEVINE, STEPI 15 BRIDGE RE KENTFIELD, C	1	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	DSTO (LEVINE, SUSA 15 BRIDGE RE KENTFIELD, C	ı	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	D (KANE, ED 45 REESE RO MILLVILLE, NJ		Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	P (MANFRED, SA 435 BRITTANIA PETALUMA, CA	CT.	Title: Name: Address: Citv-St-Zip:	P (X MANFRED, SA 24 HOLLYLEAI NOVATO, CA S	F WAY	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MANFRED SALOMON PRES 03/28/2005