

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000034687

Entity Name: BIOIMMUNE, INC.

FILED
Mar 01, 2006
Secretary of State

Current Principal Place of Business:

8300 N HAYDEN ROAD, SUITE A203
SCOTTSDALE, AZ 85258

New Principal Place of Business:

Current Mailing Address:

8300 N HAYDEN ROAD, SUITE A203
SCOTTSDALE, AZ 85258

New Mailing Address:

FEI Number: 65-0744370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS RD
#221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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: FRANK CAMMARATA

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAKEMOTO, ARNOLD
Address: 8300 N. HAYDEN ROAD, SUITE A203
City-St-Zip: SCOTTSDALE, AZ 85258

Title: D () Delete
Name: BRODIE, W D
Address: 8300 N HAYDEN ROAD, SUITE A203
City-St-Zip: SCOTTSDALE, AZ 85258

Title: D (X) Delete
Name: BRODIE, DOUGLAS DR.
Address: 7332 E. BUTHERUS DRIVE, SUITE 101
City-St-Zip: SCOTTSDALE, AZ 85260

Title: D (X) Delete
Name: SEE, DARRYL DR
Address: 7332 E BUTHERUS DR STE 101
City-St-Zip: SCOTTSDALE, AZ 85260

Title: D (X) Delete
Name: JORDAN, LARRY
Address: 7332 E BUTHERUS DR STE 101
City-St-Zip: SCOTTSDALE, AZ 85260

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: TAKEMOTO, COLEEN
Address: 8300 N HAYDEN ROAD, SUITE A203
City-St-Zip: SCOTTSDALE, AZ 85258

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 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: ARNOLD TAKEMOTO

PD

03/01/2006

Electronic Signature of Signing Officer or Director

Date