2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080367

Entity Name: MITOPHARM CORPORATION

MING KO, ROBERT K

SEATTLE, WA 98101

601 UNION STREET STE 4500

Name: Address:

City-St-Zip:

Jul 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7235 NORTH CREEK LOOP C/O THE OTTO LAW GROUP GIG HARBOR, WA 98335 601 UNION ST SUITE 4500 US SEATTLE, WA 98101 **Current Mailing Address: New Mailing Address:** C/O THE OTTO LAW GROUP 601 UNION STREET, STE 4500 SEATTLE, WA 98101 FEI Number: 22-3538310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INCORPORATION SERVICES, LTD 1540 GLENWAY DR TALLAHASSEE, FL 32301 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition CAREAGA, STEPHEN CHEUNG, PETER Name: Name: 7235 NORTH CREEK LOOP 601 UNION STREET STE 4500 Address: Address: City-St-Zip: GIG HARBOR, WA 98335 US City-St-Zip: SEATTLE, WA 98101 US Title: Title: () Delete (X) Change () Addition Name: CHEUNG, PAK P Name: CHEUNG, PAUL P 601 UNION STREET STE 4500 601 UNION STREET STE 4500 Address: Address: SEATTLE, WA 98101 SEATTLE, WA 98101 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition HO CHEUNG, PAUL P KO, ROBERT K Name: Name: 601 UNION STREET STE 4500 601 UNION STREET STE 4500 Address: Address: City-St-Zip: SEATTLE, WA 98101 City-St-Zip: SEATTLE, WA 98101 Title: (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PETER CHEUNG D 07/11/2007