

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000066545

FILED  
Sep 13, 2005  
Secretary of State

Entity Name: ALPHAMED PHARMACEUTICALS CORPORATION

## Current Principal Place of Business:

4625 EAST BAY DRIVE  
SUITE 302  
CLEARWATER, FL 33785

## New Principal Place of Business:

2875 MCI DRIVE  
PINELLAS PARK, FL 33782

## Current Mailing Address:

4625 EAST BAY DRIVE  
SUITE 302  
CLEARWATER, FL 33785

## New Mailing Address:

2875 MCI DRIVE  
PINELLAS PARK, FL 33782

FEI Number: 59-3587193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEZDEY, JARETT  
4625 EAST BAY DRIVE  
SUITE 302  
CLEARWATER, FL 33785 US

## Name and Address of New Registered Agent:

LEZDEY, JARETT  
2875 MCI DRIVE  
PINELLAS PARK, FL 33782 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:

09/13/2005

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: LEZDEY, DARREN  
Address: 4625 EAST BAY DR, STE 302  
City-St-Zip: CLEARWATER, FL 33785

Title: DV ( ) Delete  
Name: LEZDEY, JARETT  
Address: 4625 EAST BAY DR, STE 302  
City-St-Zip: CLEARWATER, FL 33785

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LEZDEY, DARREN  
Address: 2875 MCI DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

Title: DV (X) Change ( ) Addition  
Name: LEZDEY, JARETT  
Address: 2875 MCI DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

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: JARETT LEZDEY

DV

09/13/2005

Electronic Signature of Signing Officer or Director

Date