

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022237

Entity Name: KYTO BIOPHARMA, INC.

FILED  
Apr 11, 2007  
Secretary of State

**Current Principal Place of Business:**

3801 PGA BOULEVARD., SUITE 802  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

3801 PGA BOULEVARD., SUITE 802  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 65-1086538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SINGER, MICHAEL S ESQ.  
3801 PGA BOULEVARD., SUITE 802  
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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BERGER, JEAN-LUC  
Address: 207 ROBERT HICKS DRIVE  
City-St-Zip: TORONTO ONTARIO CANADA, M2R3R3

Title: D ( ) Delete  
Name: BENARROCH, GEORGES  
Address: 68 RUE SPONTINI  
City-St-Zip: PARIS FRANCE 75016,

Title: D ( ) Delete  
Name: MACADAM, DONALD  
Address: 318 GRACE STREET, P.O. BOX 1288  
City-St-Zip: PORT DOVER ONTARIO CANADA, N0A1N0

**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 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: GEORGES BENARROCH

D

04/11/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date