

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

401.222.30

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(e)d) is a strength for a figure of the strength for a f

2. Name of Cor BB Farma	poration			
	ceuticais, inc.			
3. Street Address Principal Business Office 69 Garfield Street		City Newport	State	Zip
Business Phone No. 5. State of Incorporation Delaware		Tromport		02840
of Business Conduction of herbal sl	cted in Rhode Island			
		CHMENT) [] FILL IN	SPACES BEFORE USING	ATTACHMENTS
Brenda Brock Barclay de Tolly		Vice President Name None		
Street Address 1003 Anthony Road		Street Address		
State RI	<sup>Zip</sup> 02871	City	State	Zip
Secretary Name Brenda Brock Barclay de Tolly		Treasurer Name Paul Barclay de Tolly		
Street Address 1003 Anthony Road		Street Address 1003 Anthony Road		
State RI	<sup>Zip</sup> 02871	City Portsmouth	State	276 9 <b>2</b> 871
OF THE DIRE	CTORS: ("X" BOX FOR ATI	•		1 = *** . 2 * 1
Brenda Brock Barclay de Tolly		Director Name Paul Barclay de Tolly		- 3. Jakon
Street Address 1003 Anthony Road		Street Address 1003 Anthony Road		
State	Zin			
RI	02871	Portsmouth	RI	2p 43.
Director Name Susan A. Keller, Esq.		Director Name		
ngell Palmer &	& Dodge LLP	Street Address		
State RI	<sup>Zip</sup> 02903	City	State	Zip
'	ı	10. SHARES ISSUED	("X" BOX FOR ATTACE	HMENT) [
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.				<u> </u>
				Par Value
		2,211,700	- John Hill	\$.001 Par
This report must be executed on behalf of the corporation by an authorized			Preferred	\$.001 Par
	of Business Conduction of herbal skips of THE OFFI  State RI Tolly  State RI Tolly  State RI Tolly  State RI  Tolly  State RI  Tolly  State RI  Tolly  State RI  Tolly  OF THE DIRE  Tolly  State RI  OF THE DIRE  Tolly  State RI  OF THE DIRE  Tolly	State   Zip   O2871	State of Incorporation   Delaware	S. State of Incorporation   Delaware

this report must be executed on behalf of the corporation by the receiver or trustee.

_	FILED				
i	Ck No. By 0138				
	FOR SECRETARY OF STATE USE ONLY				

<i>J</i>	Under penalty of perjury, I declare and affirm the including any accompanying schedules and state contained herein are true and correct.  Signature  Brenda Brock Barclay de Print or Type Name  President	ements, and that all statements ruary 28, 2009  Date
,	Title	Form 630 Rev. 08/08