



INCORPORATED IN BRITISH COLUMBIA

NUMBER

ZQ000000

InNEXUS BIOTECHNOLOGY INC.

SHARES

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THIS CERTIFIES THAT

* SPECIMEN * ZQ000000 * 45771Q104 * 0 COMMON SHARES OF INNEXUS BIOTECHNOLOGY INC. * SPECIMEN * ZQ000000
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IS THE REGISTERED HOLDER OF

CUSIP: 45771Q 10 4

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FULLY PAID AND NON-ASSESSABLE COMMON SHARES WITHOUT PAR VALUE

in the Capital of the above named Company subject to the Memorandum and Articles of the Company transferable on the books of the Company by the registered holder in person or by Attorney duly authorized in writing upon surrender of this certificate properly endorsed.

This certificate is not valid until countersigned by the Transfer Agent and Registrar of the Company.

IN WITNESS WHEREOF the Company has caused this certificate to be signed on its behalf by the facsimile signatures of its duly authorized officers at Vancouver, British Columbia, Canada.

DATED June 25, 2003

Alton C. Morgan
President

Scott Rogers
Director

COUNTERSIGNED AND REGISTERED
PACIFIC CORPORATE SERVICES LTD
TRANSFER AGENT AND REGISTRAR

VANCOUVER

BY: _____

Authorized Officer

SECURITY INSTRUCTIONS ON REVERSE

VOIR LES INSTRUCTIONS DE SÉCURITÉ AU VERSO

The Shares represented by this Certificate are transferable at the offices
of Pacific Corporate Services Ltd, Vancouver, British Columbia.

118389

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The following abbreviations shall be construed as though the words set forth below opposite each abbreviation were written out in full where such abbreviation appears:

| | |
|---|---|
| TEN COM | - as tenants in common |
| TEN ENT | - as tenants by entree |
| JT TEN | - as joint tenants with right of survivorship and not tenants in common |
| (Name) CUST (Name) UNIF | - (Name) as Custodian for (Name) under the |
| GIFT MIN ACT (State) | (State) Uniform Gifts to Minors Act |
| In the case of an individual assignee, show at least one given name in full | |

Additional abbreviations may also be used though not in the above list.

FOR VALUE RECEIVED, the undersigned hereby sells, assigns, and transfers unto

PLEASE INSERT SOCIAL INSURANCE NUMBER,
SOCIAL SECURITY NUMBER, OR OTHER

IDENTIFYING NUMBER OF TRANSFEREE

S.I.N./S.S.N. - - - - -

Please print or typewrite name and address (including postal code or zip code, as applicable) of transferee

registered in the name of the undersigned on the books of the Company named on the face of this certificate and represented hereby, and irrevocably constitutes and appoints a duly authorized officer of the transfer agent and registrar as the attorney of the undersigned to transfer the said shares on the register of transfers and books of the Company with full power of substitution hereunder. shares

DATED: 20 Signature:

NOTICE: The signatures of this assignment must correspond with the name as written upon the face of the certificate, in every particular, without alteration or enlargement, or any change whatsoever, and must be guaranteed by a Canadian chartered bank or eligible guarantor institution with membership in an approved signature guarantee medallion program.

Signature Guaranteed By:

SECURITY INSTRUCTIONS - INSTRUCTIONS DE SÉCURITÉ

THIS IS WATERMARKED PAPER. DO NOT ACCEPT WITHOUT NOTING
WATERMARK. HOLD TO LIGHT TO VERIFY WATERMARK.
PAPIER FILIGRANÉ. NE PAS ACCEPTER SANS VÉRIFIER LA PRÉSENCE
DU FILIGRANE. POUR CE FAIRE, PLACER À LA LUMIÈRE.

