2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005873

Entity Name: LIFEWATCH TECHNOLOGIES INC.

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
10255 HIGGINS RD ROSEMONT, IL 60018				10255 HIGGINS RD SUITE100 ROSEMONT, IL 60018			
Current Mailing Address:				New Mailing Address:			
10255 HIGGINS RD ROSEMONT, IL 60018			10255 HIGGINS RD SUITE 100 ROSEMONT, IL 60018				
FEI Number:	36-4381458	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Statu	us Desired()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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.							
SIGNATUF							
Electronic Signature of Registered Agent						Date	
		Trust Fund Contribution ().		ADDITION	O'OUANOEO	TO 05510500 (NA DIDECTORS
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () I MINDERMANN, I 10255 HIGGINS ROSEMONT, IL	RD		Title: Name: Address: City-St-Zip:	RICHARDSON,	S RD SUITE 100	1
Title: Name: Address: City-St-Zip:	CFO (X) LEONARD, FRAI 10255 HIGGINS ROSEMONT, IL	RD		Title: Name: Address: City-St-Zip:	()) Change()Addition	1
Title: Name: Address: City-St-Zip:	S () RICHARDSON, F 10255 HIGGINS ROSEMONT, IL	RD		Title: Name: Address: City-St-Zip:	RICHARDSON,	S RD SUITE 100	n
Title: Name: Address: City-St-Zip:	T () I TURCHI, MICHAI 10255 HIGGINS ROSEMONT, IL	RD		Title: Name: Address: City-St-Zip:	TURCHI, MICH	S RD SUITE 100	n
Title: Name: Address: City-St-Zip:	D () EFRAIM, KOBI E 10255 HIGGINS ROSEMONT, IL	RD		Title: Name: Address: City-St-Zip:	EFRAIM, KOBI	S RD SUITE 100	n
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	WETTSTEIN, U	INS RD SUITE 100	n

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.

SIGNATURE: MICHAEL TURCHI T 03/18/2008