

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163464

Entity Name: KIDNEY KARE, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

633 NE 2 PLACE
DANIA BEACH, FL 33004

New Principal Place of Business:

3350 SW 3RD AVENUE
SUITE 11
FT. LAUDERDALE, FL 33315 US

Current Mailing Address:

633 NE 2 PLACE
DANIA BEACH, FL 33004

New Mailing Address:

3350 SW 3RD AVENUE
SUITE 11
FT. LAUDERDALE, FL 33315 US

FEI Number: 20-1958580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDGREN, WENDY
633 NE 2 PLACE
DANIA BEACH, FL 33004 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: P () Delete
Name: LINDGREN, WENDY
Address: 633 NE 2 PLACE
City-St-Zip: DANIA BEACH, FL 33004 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: MICHAEL, HANK
Address: 5602 LEITNER DRIVE EAST
City-St-Zip: CORAL SPRINGS, FL 33067 US

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: WENDY LINDGREN

P

04/18/2006

Electronic Signature of Signing Officer or Director

Date