


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 10, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 183911 1. Entity Name LIFLANS CORP.	
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Principal Place of Business 6400 CONGRESS AVE SUITE 2000 BOCA RATON, FL 33487	Mailing Address 6400 CONGRESS AVE SUITE 2000 BOCA RATON, FL 33487
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02282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6064577	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVY, HARRY A  
6400 CONGRESS AVE  
SUITE 2000  
BOCA RATON, FL 33487

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

1100000258652  
03/10/05-80049-015 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEVY, HARRY A 6400 CONGRESS AVE SUITE 2000 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LIFTER, BENNETT 18425 N.W. 2ND AVE MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LANSBURGH, LEONARD 2875 N.E. 191ST ST SUITE 505 CARBONDALE, CO 81623
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harry A Levy - PRES. Date: 3/7/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR