

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002765

Entity Name: DIABETIC CARE TEAM.COM INC.

FILED
Jan 28, 2005
Secretary of State

Current Principal Place of Business:

13804 150 CT N
JUPITER, FL 33478

New Principal Place of Business:

6671 W INDIAN TOWN RD
SUITE 56-244
JUPITER, FL 33458

Current Mailing Address:

13804 150 CT N
JUPITER, FL 33478

New Mailing Address:

6671 W INDIAN TOWN ROAD
SUITE 56-244
JUPITER, FL 33458

FEI Number: 43-1960404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIRINSKY, MARILYN
13809 150 COURT NORTH
JUPITER, FL 33478 US

Name and Address of New Registered Agent:

CHIRINSKY, MARILYN
6671 W INDIAN TOWN RD
56-244
JUPITER, FL 33478 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.

SIGNATURE: MARILYN CHIRINSKY

01/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHIRINSKY, MARILYN
Address: 13804 150TH CT N
City-St-Zip: JUPITER, FL 33478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHIRINSKY, MARILYN PRESIDE
Address: 6671 W INDIAN TOWN RD
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARILYN CHIRINSKY

PRES

01/28/2005

Electronic Signature of Signing Officer or Director

Date