2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002765

Entity Name: DIABETIC CARE TEAM.COM INC.

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: 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: Name and Address of New Registered Agent:

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

CHIRINSKY, MARILYN
6671 W INDIAN TOWN RD
56-244
JUPITER, FL 33458 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 04/29/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 CHIRINSKY, MARILYN PRESIDE
 Name:
 CHIRINSKY, MARILYN PRESIDE

 Address:
 6671 W INDIAN TOWN RD
 Address:
 6671 W INDIAN TOWN RD 56-244

City-St-Zip: JUPITER, FL 33458 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 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: MARILYN CHIRINSKY PRES 04/29/2006