2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002428

FILED Jan 10, 2006 Secretary of State

Entity Name: THE PROMEDISS FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** PO BOX 267035 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** PO BOX 267035 WESTON, FL 33326 FEI Number: 90-0045608 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: SCHWARTZ, DAVID A ESQ 8181 W. BRÓWARD BLVD STE 204 PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PTD () Change () Addition () Delete FIXEL, SUSAN Name: Name: Address: 1359 SHOTGUN ROAD Address: City-St-Zip: SUNRISE, FL 33326 City-St-Zip: Title: VD Title: () Change () Addition () Delete Name: FIXEL, LEE Name: Address: 1359 SHOTGUN ROAD Address: City-St-Zip: SUNRISE, FL 33326 City-St-Zip: Title: () Delete Title: () Change () Addition FIXEL, TARYN Name: Name: 1359 SHOTGUN ROAD Address: Address: City-St-Zip: SUNRISE, FL 33326 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN FIXEL PTD 01/10/2006