2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006063

Entity Name: OPERATION LIFESHIELD, INC.

FILED Apr 16, 2009 Secretary of State

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

270 MADISON AVE. 17TH FLOOR NEW YORK, NY 10016

Current Mailing Address: New Mailing Address:

270 MADISON AVE. 17TH FLOOR NEW YORK, NY 10016

FEI Number: 26-0380466 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:

BLAIR, LAURENCE ESQ. 100 W. CYPRESS CREEK ROAD SUITE 700 FORT LAUDERDALE, FL 33309 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:

Clarksonia Ciamakura of Daniakura d Annut

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

tle: D () Delete Title: D (X) Change () Addition

Name: SUPOVITZ, MITCHEL
Address: 299 CAMINO GARDENS BLVD. #100
Address: 160 NW 16TH STREET

City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete Title: () Change () Addition

 Name:
 LESHKOWITZ, HERBERT
 Name:

 Address:
 270 MADISON AVENUE - 17TH FLOOR
 Address:

 City-St-Zip:
 NEW YORK, NY 10016
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MITCHEL SUPOVITZ D 04/16/2009