

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040571

FILED  
Jul 14, 2008  
Secretary of State

Entity Name: LIFETIME MEDICAL CARE, P.A.

## Current Principal Place of Business:

2300 PARK AVENUE  
203  
ORANGE PARK, FL 32073 US

## New Principal Place of Business:

## Current Mailing Address:

5000 US HWY 17  
18-302  
ORANGE PARK, FL 32003

## New Mailing Address:

FEI Number: 03-0426165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EL RIMAWI, NIDAL  
5000 US HIGHWAY 17  
SUITE 18-302  
ORANGE PARK, FL 32003 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DR ( ) Delete  
Name: EL RIMAWI, NIDAL  
Address: 5000 HIGHWAY 17 SUITE 18-302  
City-St-Zip: ORANGE PARK, FL 32003

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NIDAL ELRIMAWI

MD

07/14/2008

Electronic Signature of Signing Officer or Director

Date