2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054008

Entity Name: PALION MEDICAL CORPORATION

FILED Mar 08, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
250 WEST 57TH STREET NEW YORK, NY 10107	T, STE 1716			
Current Mailing Address:		New Mailing Address:		
21113 BIRDSNEST TERR. BOCA RATON, FL 33433		250 W 57TH STREET SUITE 1716 NEW YORK, NY 10107		
FEI Number: 06-1700008	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
LEDERER, KLAUS DR 1736 PERSIMMON DRIVE NAPLES, FL 34109 US				
The above named entity s in the State of Florida.	ubmits this statement for the p	ourpose of changing its registered of	ffice or registered agent, or both,	

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

SIGNATURE:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Delete Title: (X) Change () Addition CARLSON, JUD L PRESENT, DAVID A Name: Name: 1900 CORPORATE BLVD, SUITE 400 Address: 250 W 57TH STREET, SUITE 1716 Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: NEW YORK, NY 10107

Title: MS. () Delete Title: (X) Change () Addition DAVID, GREG Name: KRAUS, MARIE Name:

Address: Address: 1900 CORPORATE BLVD, SUITE 400 250 W 57TH STREET, SUITE 1716

Electronic Signature of Registered Agent

BOCA RATON, FL 33431 NEW YORK, NY 10107 City-St-Zip:

City-St-Zip:

Title: Title: () Delete MR () Change (X) Addition Name:

Name: LEDERER, KLAUS Address: 1736 PERSIMMON DRIVE Address: City-St-Zip: City-St-Zip: NAPLES, FL 34109

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 Statutés. 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: DAVID A PRESENT 03/08/2005 CEO