2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157169

Entity Name: CHINA HEALTHCARE TECHNOLOGY INC.

FILED May 19, 2004 Secretary of State

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

1600 SE 15TH STREET 1126 SO. FEDERAL HIGHWAY

#512 #300

FT. LAUDERDALE, FL 33316 US FT. LAUDERDALE, FL 33316 US

Current Mailing Address: New Mailing Address:

1600 SE 15TH STREET 1126 SO. FEDERAL HIGHWAY

#512 #300

FT. LAUDERDALE, FL 33316 US FT. LAUDERDALE, FL 33316 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

COHEN, BARRY F COHEN, BARRY F

1600 SE 15TH STREET 1126 SO. FEDERAL HIGHWAY

#512 #300 FT. LAUDERDALE, FL 33316 US FT. LAUDERDALE, FL 33316 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: BARRY F. COHEN 05/19/2004

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. () Delete Title: DIR. (X) Change () Addition

 Name:
 COHEN, BARRY F
 Name:
 COHEN, BARRY F

 Address:
 1600 SE 15TH STREET #512
 Address:
 1126 SO. FEDERAL HIGHWAY

Address: 1600 SE 15TH STREET #512 Address: 1126 SO. FEDERAL HIGHWAY
City-St-Zip: FT. LAUDERDALE, FL 33316 US City-St-Zip: FT. LAUDERDALE, FL 33316 US

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 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: BARRY F. COHEN DIR. 05/19/2004