

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056534

Entity Name: LEXI MEDICAL CORP.

FILED  
Apr 13, 2006  
Secretary of State

## Current Principal Place of Business:

1985 S. OCEAN DRIVE  
16N  
HALLANDALE, FL 33009 US

## New Principal Place of Business:

## Current Mailing Address:

1985 S. OCEAN DRIVE  
16N  
HALLANDALE, FL 33009 US

## New Mailing Address:

FEI Number: 20-2679937

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VIRGIL, JAMES E  
999 PONCE DE LEON BLVD.  
PH 1120  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

DEL REY, WALDO  
1985 S. OCEAN DRIVE  
16N  
HALLANDALE BEACH, FL 33009 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: WALDO DEL REY

04/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DEL REY, WALDO  
Address: 1985 S. OCEAN DRIVE, 16N  
City-St-Zip: HALLANDALE, FL 33009 US

Title: SEC ( ) Delete  
Name: DEL REY, ALICIA  
Address: 1985 S. OCEAN DRIVE, 16N  
City-St-Zip: HALLANDALE, FL 33009 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: WALDO DEL REY

PRES

04/13/2006

Electronic Signature of Signing Officer or Director

Date