

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077262

Entity Name: SNAPDRAGON MEDICAL, INC.

FILED
Apr 01, 2006
Secretary of State

Current Principal Place of Business:

BANK OF AMERICA CENTRE
401 EAST LAS OLAS BLVD., SUITE 130
FT. LAUDERDALE, FL 33301

Current Mailing Address:

BANK OF AMERICA CENTRE
401 EAST LAS OLAS BLVD., SUITE 130
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

5801 ULMERTON ROAD
SUITE 201
CLEARWATER, FL 33760

New Mailing Address:

5801 ULMERTON ROAD
SUITE 201
CLEARWATER, FL 33760

FEI Number: 20-2908806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DRAGON, VICTOR R
Address: 401 EAST LAS OLAS BLVD., SUITE #130
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: DRAGON, VICTOR L
Address: 8208 SILVER MIST PLACE
City-St-Zip: TRINITY OAKS, FL 34655

Title: D () Delete
Name: HILL, J. JAY
Address: 2910 PHILIPPE PARKWAY
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DRAGON, VICTOR R
Address: 5801 ULMERTON ROAD, SUITE 201
City-St-Zip: CLEARWATER, FL 33760

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

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

Title: D () Change (X) Addition
Name: PETERS, RICHARD C
Address: 1140 QUAIL ROOST COURT
City-St-Zip: VIRGINIA BEACH, VA 23451

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: VICTOR R DRAGON

D

04/01/2006

Electronic Signature of Signing Officer or Director

Date