2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000147468

Entity Name: LIFELINK MD CENTER INC.

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4081 YUCATAN CIRCLE PORT CHARLOTTE, FL 33948 US **Current Mailing Address: New Mailing Address:** PO BOX 380623 PORT CHARLOTTE, FL 33938 US FEI Number: 20-3787036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: RIFKIN, LENNY RIFKIN, LEONARD J 4081 YÜCATAN CIRCLE 4081 YÜCATAN CIRCLE PORT CHARLOTTE, FL 33948 US PORT CHARLOTTE, FL 33948 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: LEONARD J. RIFKIN 04/18/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition RIFKIN, LENNY RIFKIN, LEONARD J Name: Name: 4081 YUCATAN 4081 YUCATAN CIRCLE Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33948 US City-St-Zip: PORT CHARLOTTE, FL 33948 US Title: () Change (X) Addition Title: () Delete SCIESZINSKI, CANDACE Name: Name: 4081 YUCATAN CIRCLE Address: Address: PORT CHARLOTTE, FL 33948 City-St-Zip: City-St-Zip: Title: Title: () Delete VΡ () Change (X) Addition CUOMO, AL Name: Name: 4081 YUCATAN CIRCLE Address Address: City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33948 Title: () Delete Title: () Change (X) Addition COLLETT, JOAN Name: Name: Address: Address: 4081 YUCATAN CIRCLE City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33948 Title: Title: () Change (X) Addition () Delete CILIBERTO, DAWN Name: Name: Address: Address: 4081 YUCATAN CIRCLE City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33948

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: LEONARD J. RIFKIN P 04/18/2006