2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P05000153312

Entity Name: PRO MED DIRECT, INC.

Current Principal Place of Business:

2785 RAVELLA WAY
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

11368 93RD ST. N.
LARGO, FL 33773

Current Mailing Address:

2785 RAVELLA WAY
PALM BEACH GARDENS, FL 33410

New Mailing Address:

11368 93RD ST. N.
LARGO, FL 33773

FEI Number: 20-3797852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, JEFFREY D
2785 RAVELLA WAY
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

SCHMITZ, KATHLEEN M
11368 93RD ST. N.
LARGO, FL 33773 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: KATHLEEN M. SCHMITZ 04/24/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JOHNSON, JEFFREY D
Address: 2785 RAVELLA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SCHMITZ, KATHLEEN M
Address: 11368 93RD ST. N.
City-St-Zip: LARGO, FL 33773

Title: D ( ) Change (X) Addition
Name: SMITH, STEVEN R
Address: 9227 NILE DR.
City-St-Zip: NEW PORT RICHEY, FL 34655

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: KATHLEEN M. SCHMITZ D 04/24/2006
Electronic Signature of Signing Officer or Director Date