2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000160255

FILED Sep 15, 2006 Secretary of State

Entity Name: THE LIFE SAVE, INC. **Current Principal Place of Business: New Principal Place of Business:** 2332 GALIANO ST. CORAL GABLES, FL 33134 **Current Mailing Address: New Mailing Address:** 2520 S.W. 22ND ST. SUITE 2 CORAL GABLES, FL 331453438 FEI Number: 14-1943001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REINER, II, SAMUEL B ESQ 9100 SOUTH DADELAND BLVD. **SUITE 1408** MIAMI, FL 33156 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PST () Delete Title: () Change () Addition KAHN, JACK V Name: Name: 1825 PONCE DE LEON BLVD., SUITE 421 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

Title: () Delete Title: VP () Change (X) Addition

Name: Name: SALMAN, FATEMIAN

Address: Address: 1825 PONCE DE LEON BLVD., SUITE 421

City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134

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: SAMUEL B. REINER, II ESQ. 09/15/2006