

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055275

Entity Name: DIACARERX, INC.

FILED
Jan 10, 2007
Secretary of State

Current Principal Place of Business:

3575 23RD AVE. SOUTH, SUITE 101
LAKE WORTH, FL 33461

New Principal Place of Business:

19 SOUTH DIXIE HWY
LAKE WORTH, FL 33460 US

Current Mailing Address:

3575 23RD AVE. SOUTH, SUITE 101
LAKE WORTH, FL 33461

New Mailing Address:

19 SOUTH DIXIE HWY
LAKE WORTH, FL 33460 US

FEI Number: 20-4570370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KREBS, ROBERT T
3575 23RD AVE. SOUTH, SUITE 101
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

KREBS, ROBERT T
19 SOUTH DIXIE HWY
LAKE WORTH, FL 33460 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: ROBERT T. KREBS

01/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIA-CARE, INC.,
Address: 3575 23RD AVE. SOUTH, SUITE 101
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIA-CARE, INC.,
Address: 19 SOUTH DIXIE HWY
City-St-Zip: LAKE WORTH, FL 33460

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: ROBERT T. KREBS

VP

01/10/2007

Electronic Signature of Signing Officer or Director

Date