

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000090517

FILED
Mar 11, 2009
Secretary of State

Entity Name: LIFE-LINE MED TRAININGS, CORP.

Current Principal Place of Business:

10300 SW 72ND ST
SUITE # 360
MIAMI, FL 33173

New Principal Place of Business:

10300 SW 72ND ST
SUITE # 380
MIAMI, FL 33173 US

Current Mailing Address:

10300 SW 72ND ST
SUITE # 360
MIAMI, FL 33173

New Mailing Address:

10300 SW 72ND ST
SUITE # 380
MIAMI, FL 33173 US

FEI Number: 41-2210277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTANA, SANTOS
4671 SW 153 PL
MIAMI, FL 33185 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: P () Delete
Name: SANTANA, SANTOS
Address: 4671 SW 153 PL
City-St-Zip: MIAMI, FL 33185

Title: VP () Delete
Name: SANTANA, MARISEL
Address: 4671 SW 153 PL
City-St-Zip: MIAMI, FL 33185

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S () Change (X) Addition
Name: ARIAS, KENYA
Address: 13434 SW 124 AVE RD
City-St-Zip: MIAMI, FL 33186 US

Title: D () Change (X) Addition
Name: FERNANDEZ, OMAR
Address: 2411 SW 129 AVE
City-St-Zip: MIAMI, FL 33175 US

Title: T () Change (X) Addition
Name: FERNANDEZ, NADIA
Address: 2411 SW 129 AVE
City-St-Zip: MIAMI, FL 33175 US

Title: D () Change (X) Addition
Name: PILOTO, JORGE
Address: 21417 NW 39 AVE
City-St-Zip: OPA LOCKA, FL 33055 US

I hereby certify that the information supplied with this filing does not qualify 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: SANTOS SANTANA

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date