2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000075902

Entity Name: CARECONNECT INC.

JOSEPH. IAN

10600 N.W. 28TH STREET

SUNRISE, FL 33322

Name:

Address:

City-St-Zip:

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18112 NW 19TH ST PEMBROKE PINES, FL 33029 US **Current Mailing Address: New Mailing Address:** 9900 W SAMPLE RD SUITE 300 CORAL SPRINGS, FL 33065 US FEI Number: 65-0542959 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: KURT, JOSEPH 18112 NW 19TH ST. PEMBROKE PINES, FL 33029 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPST () Delete Title: () Change () Addition JOSEPH, KURT Name: Name: 18112 NW 19TH STREET Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: Title: Title: () Change () Addition () Delete

Name:

Address:

City-St-Zip:

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: KURT JOSEPH DPST 04/30/2006