2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P95000057655

Entity Name: COLONIAL HEALTH CARE SERVICES, INC.

Current Principal Place of Business:

2101 W. ATLANTIC BLVD
STE 110
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

2101 W. ATLANTIC BLVD
STE 110
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 65-0597516 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POMERANZ, MARK ESQ
12955 BISCAYNE BLVD
SUITE 202
NORTH MIAMI, FL 33181 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: PD ( ) Delete
Name: LEVY, YUVAL
Address: 3155 NW 60TH ST
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEVY, YUVAL
Address: 2101 W. ATLANTIC BLVD SUIT 110
City-St-Zip: POMPANO, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEVY, YUVAL P 04/29/2005

Electronic Signature of Signing Officer or Director Date