2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# P95000068811

Entity Name: FAMILY FOCUS INFUSION, INC.

Current Principal Place of Business:

1539 PARENTAL HOME RD
SUITE #5
JACKSONVILLE, FL 32216

New Principal Place of Business:

4417 BEACH BLVD
SUITE # 101
JACKSONVILLE, FL 32207

Current Mailing Address:

1539 PARENTAL HOME RD
SUITE #5
JACKSONVILLE, FL 32216

New Mailing Address:

4417 BEACH BLVD
SUITE # 101
JACKSONVILLE, FL 32207

FEI Number: 59-3332965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAHILIANI, ARUN G
1539 PARENTAL HOME RD
SUITE #5
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

TAHILIANI, ARUN G
4417 BEACH BLVD
SUITE # 101
JACKSONVILLE, FL 32207 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: 01/08/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TAHILIANI, ARUN G
Address: 1539 PARAENTAL HOME RD #5
City-St-Zip: JACKSONVILLE, FL 32216

Title: V ( ) Delete
Name: JONES, DIANE
Address: 1539 PARENTAL HOME RD #5
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TAHILIANI, ARUN G
Address: 4417 BEACH BLVD, STE 101
City-St-Zip: JACKSONVILLE, FL 32207

Title: V (X) Change ( ) Addition
Name: JONES, DIANE
Address: 4417 BEACH BLVD, STE 101
City-St-Zip: JACKSONVILLE, FL 32207

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: ARUN G TAHILIANI PD 01/08/2008
Electronic Signature of Signing Officer or Director — Date