2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2004
Secretary of State

DOCUMENT# P96000050012

Entity Name: SOUTH FLORIDA LIFELINE, INC.

Current Principal Place of Business:

4269 SW 157 COURT
MIAMI, FL 33185 US

New Principal Place of Business:

Current Mailing Address:

4269 SW 157 COURT
MIAMI, FL 33185 US

New Mailing Address:

FEI Number: 65-0694741 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOHAMAD, ANA
4269 S.W. 1ST CT.
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

MOHAMAD, FELICIANO L
4269 S.W. 1ST CT.
MIAMI, FL 33185 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: FELICIANO MOHAMAD 04/17/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: MOHAMAD, LUCIA
Address: 4269 SW 157 CT
City-St-Zip: MIAMI, FL 33185

Title: P ( ) Delete
Name: MOHAMAD, ANA
Address: 4269 SW 157 CT
City-St-Zip: MIAMI, FL 33185

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MOHAMAD, FELICIANO
Address: 4269 SW 157 CT
City-St-Zip: MIAMI, FL 33185

Title: VP (X) Change ( ) Addition
Name: MOHAMAD, LUCIA
Address: 4269 SW 157 CT
City-St-Zip: MIAMI, FL 33185

Title: AS ( ) Change (X) Addition
Name: MOHAMAD, ANA-LUCIA
Address: 4269 SW 157 CT
City-St-Zip: MIAMI, FL 33185

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: FELICIANO MOHAMAD P 04/17/2004
Electronic Signature of Signing Officer or Director Date