## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000087501

Entity Name: POINT OF LIFE, INC.

FILED Jul 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2200 CORPORATE BLVD NW 4900 N OCEAN BLVD

SUITE 401 APT 814

BOCA RATON, FL 33431 LAUDERDALE BY THE SEA, FL 33308

Current Mailing Address: New Mailing Address:

2200 CORPORATE BLVD NW 4900 N OCEAN BLVD

SUITE 401 APT 814
BOCA RATON, FL 33431 LAUDERDALE BY THE SEA, FL 33308

FEI Number: 65-0869276 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:

HCRM CORP.

2200 CORPORATE BLVD NW

SUITE 401

LEVY, MICHAEL C
4900 N OCEAN BLVD
APT 814

BOCA RATON, FL 33431 US LAUDERDALE BY THE SEA, FL 33308 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: MICHAEL LEVY 07/19/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete Title: PVST (X) Change ( ) Addition

Name: HILLIER, JEFFREY Name: HILLIER, JEFFREY

Address: C/O 2200 CORPORATE BLVD NW 401 Address: 1004 W HERITAGE CLUB CIRCLE
City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: DELRAY BEACH, FL 33483

Title: C ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LEVY, MICHAEL
 Name:

 Address:
 4900 N OCEAN BLVD APT 814
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL
 City-St-Zip:

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: MICHAEL LEVY C 07/19/2007