

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042983

FILED
Apr 01, 2006
Secretary of State

Entity Name: MEDICAL CONNECTIONS HOLDINGS, INC.

Current Principal Place of Business:

155 WILSON LAKE RD
MOORESVILLE, NC 28117

New Principal Place of Business:

2300 GLADES ROAD SUITE 202E
BOCA RATON, FL 33431

Current Mailing Address:

155 WILSON LAKE RD
MOORESVILLE, NC 28117

New Mailing Address:

2300 GLADES ROAD SUITE 202E
BOCA RATON, FL 33431

FEI Number: 65-0920373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRUDE, DALE
5217 GRAND PALMETTO WAY
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

KLEIN, JEFFREY G
2600 NORTH MILITARY TRAIL
270
BOCA RATON, FL 33431 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: JEFFREY G. KLEIN

04/01/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: WEBB, BYRON
Address: 155 WILSON LAKE RD
City-St-Zip: MOORESVILLE, NC 28117

Title: D () Delete
Name: JUDKOWITZ, HARVEY
Address: 6560 WEST ROGERS CIRCLE #15
City-St-Zip: BOCA RATON, FL 33487

Title: CFO () Delete
Name: WEBB, BYRON
Address: 155 WILSON LAKE RD
City-St-Zip: MOORESVILLE, NC 28117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: AZZATA, JOSEPH
Address: 2300 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

Title: PD (X) Change () Addition
Name: NICOLOSI, ANTHONY
Address: 2300 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

Title: CFO (X) Change () Addition
Name: CAMMARANO, DANIEL L III
Address: 2300 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33431

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: JOSEPH AZZATA

CEO

04/01/2006

Electronic Signature of Signing Officer or Director

Date