

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000153

**FILED**  
**Mar 31, 2004**  
**Secretary of State**

**Entity Name:** SPINE NEXT AMERICA CORP.

**Current Principal Place of Business:**

CITE MONDIALE, 23, PARVIS DE CHARTRONS 330  
BORDEAUX, FRANCE, OC

**New Principal Place of Business:**

8381 DIX ELLIS TRAIL  
SUITE 110  
JACKSONVILLE, FL 32256 US

**Current Mailing Address:**

CITE MONDIALE, 23, PARVIS DE CHARTRONS 330  
BORDEAUX, FRANCE, OC

**New Mailing Address:**

8381 DIX ELLIS TRAIL  
SUITE 110  
JACKSONVILLE, FL 32256 US

**FEI Number:** 46-0504761

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DP ( ) Delete  
Name: CLOIX, ERICK  
Address: 33 CITE MONDIALE 33 PARVIS DES CHARTRONS  
City-St-Zip: 33080 BORDEAUX FRANCE,

Title: S ( ) Delete  
Name: PROCTOR, STEPHEN M  
Address: 1701 GOLF ROAD STE. 800  
City-St-Zip: ROLLING MEADOWS, IL 60008

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STEPHEN M PROCTOR

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03/31/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date