2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2005
Secretary of State

DOCUMENT# J05921

Entity Name: NUA-TMJ, INC.

Current Principal Place of Business:

% STEPHAN B. WIDMEYER
2871 - A TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

3100 PORT CHARLOTTE BLVD.
PORT CHARLOTTE, FL 33952

Current Mailing Address:

3100 PORT CHARLOTTE BLVD
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 59-2651010 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WIDMEYER, STEPHAN B.
3417-F TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

ALPERN, ADA H MS.
3417-F TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 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: MS. ADA H. ALPERN 04/07/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALPERN, MICHAEL MS
Address: 3100
City-St-Zip: PORT CHARLOTTE, FL

Title: VSTP ( ) Delete
Name: ALPERN, MICHAEL C. D, DS
Address: 3100 PORT CHARLOTTE BLVD
City-St-Zip: PORT CHARLOTTE, FL

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: DR MICHAEL C. ALPERN PVST 04/07/2005
Electronic Signature of Signing Officer or Director Date