2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005
Secretary of State

DOCUMENT# K76777

Entity Name: NON-INVASIVE MONITORING SYSTEMS OF FLORIDA, INC.

Current Principal Place of Business:

1666 KENNEDY CAUSEWAY
SUITE 400
NORTH BAY VILLAGE, FL 33141 US

New Principal Place of Business:

1666 KENNEDY CAUSEWAY
SUITE 308
NORTH BAY VILLAGE, FL 33141 US

Current Mailing Address:

1666 KENNEDY CAUSEWAY
SUITE 400
NORTH BAY VILLAGE, FL 33141 US

New Mailing Address:

1666 KENNEDY CAUSEWAY
SUITE 308
NORTH BAY VILLAGE, FL 33141 US

FEI Number: 65-0338350 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
1916 SOUTH CENTRAL AVENUE
LAKELAND, FL 33803 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: D ( ) Delete
Name: KAISER, GERARD MD
Address: 1666 KENNEDY CAUSEWAY, STE 400
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: D ( ) Delete
Name: GOULD, TAFFY
Address: 1666 KENNEDY CAUSEWAY, STE 400
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: SD ( ) Delete
Name: ROBINSON, MORTON J
Address: 1666 KENNEDY CAUSEWAY, STE 400
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: D ( ) Delete
Name: KIGHT, LEILA
Address: 1666 KENNEDY CAUSEWAY, STE 400
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: CD ( ) Delete
Name: SACKNER, MARVIN A
Address: 1666 KENNEDY CAUSEWAY, STE 400
City-St-Zip: NORTH BAY VILLAGE, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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. MARVIN A SACKNER CEO 03/22/2005

Electronic Signature of Signing Officer or Director Date