

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008106

Entity Name: UNIVERSAL MEDICAL LASERS, INC.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

70 FIFTH COURT
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

70 FIFTH COURT
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 65-0698074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEIGL, HERBERT S
70 FIFTH COURT
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

DEIGL, HERBERT J
70 FIFTH COURT
VERO BEACH, FL 32962 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: HERBERT J. DEIGL

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEIGL, HERBERT J
Address: 70 FIFTH COURT
City-St-Zip: VERO BEACH, FL 32962

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: ROSE DEIGL, KAREN B
Address: 120 AMY ANN LANE
City-St-Zip: VERO BEACH, FL 32963

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: KAREN B. ROSE DEIGL

VP

04/07/2005

Electronic Signature of Signing Officer or Director

Date