2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2005
Secretary of State

DOCUMENT# P04000110369

Entity Name: WTM MANAGEMENT CONSULTANTS, INC.

Current Principal Place of Business:

5824 BEE RIDGE ROAD PMB 447
SARASOTA, FL 34233

New Principal Place of Business:

4722 SW 74 AVENUE
MIAMI, FL 33155

Current Mailing Address:

5824 BEE RIDGE ROAD PMB 447
SARASOTA, FL 34233

New Mailing Address:

4722 SW 74 AVENUE
MIAMI, FL 33155

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIEDRA, JORGE ESQ
95 MERRICK WAY STE 514
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

WORLD TRIUMPH MEDICAL, INC.
4722 SW 74 AVENUE
MIAMI, FL 33155 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: NELSON FAMADAS 01/06/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DE ARMAS, ROGER
Address: 5824 BEE RIDGE ROAD PMB 447
City-St-Zip: SARASOTA, FL 34233

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FAMADAS, NELSON
Address: 4722 SW 74 AVENUE
City-St-Zip: MIAMI, FL 33155

Title: S ( ) Change (X) Addition
Name: DE ARMAS, ROGER
Address: 5824 BEE RIDGE ROAD PMB 447
City-St-Zip: SARASOTA, FL 34233

Title: T ( ) Change (X) Addition
Name: WILLIAMS, TROY
Address: 4301 32ND STREET WEST, SUITE C8
City-St-Zip: BRADENTON, FL 34205

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: NELSON FAMADAS PRES 01/06/2005
Electronic Signature of Signing Officer or Director Date