2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000060220

Entity Name: NU-MEDTEK, INC.

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1890 STATE ROAD 436 SUITE 295 1890 STATE ROAD 436 SUITE 201 WINTER PARK, FL 32792 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

1890 STATE ROAD 436 SUITE 295 1980 STATE ROAD 436 SUITE 201 WINTER PARK, FL 32792 WINTER PARK, FL 32792

FEI Number: 20-8997781 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BAILEY, DAWN
1890 STATE ROAD 436 SUITE 295
WINTER PARK, FL 32792 US

BAILEY, DAWN
1890 STATE ROAD 436 SUITE 201
WINTER PARK, FL 32792 US

WINTER PARK, FL 32792 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: DAWN BAILEY 04/24/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: BAILEY, DAWN Name:

 Name:
 BAILEY, DAWN
 Name:

 Address:
 2036 SULTAN CIRCLE
 Address:

 City-St-Zip:
 CHULUOTA, FL 32766
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAWN BAILEY P 04/24/2008