## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000002530

City-St-Zip:

BRADENTON, FL 34205

FILED Jan 07, 2005 Secretary of State

Entity Name: WORLD TRIUMPH MEDICAL, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4722 SW 7 MIAMI, FL	'4TH AVENUE 33155 US				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4722 SW 74TH AVENUE MIAMI, FL 33155 US					
FEI Number:	65-0381002	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MUR AND ASSOCIATES, PA SUNTRUST INTERNATIONAL CENTER SUITE 1940 ONE S.E THIRD AVE MIAMI, FL 33131 US				4722 SW 74 AVENUE	
	named entity s of Florida.	submits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: NELSON FAMADAS				01/07/2005	
	Electror	nic Signature of Registered Ager	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D ( ) NELSON FAMA 1332 ASTERIA CORAL GABLE	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST ( ) ROGER DE AR 5441 HOWARE SARASOTA, FL	CAEERRD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VPD ( ) WILLIAMS, TRO 1008 44ST WE		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: NELSON FAMADAS Ρ 01/07/2005