
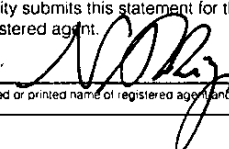
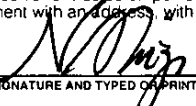


2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P98000030569 1. Entity Name NUONICS, INC.			FILED 07 NOV 28 AM 9: 05 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 1025 S SEMORAN BLVD. STE. 1093 WINTER PARK, FL 32792 US		Mailing Address 1025 S SEMORAN BLVD. STE. 1093 WINTER PARK, FL 32792 US	
2. Principal Place of Business - No P.O. Box # 1862 ROYAL MAJESTY CT		3. Mailing Address 1862 ROYAL MAJESTY CT.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State OVIEDO, FL		City & State OVIEDO, FL	
Zip 32765		Zip 32765	
Country		Country	
4. FEI Number 59-3501444		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RIZA, NABEEL A 1025 S SEMORAN BLVD. STE. 1093 WINTER PARK, FL 32792		7. Name and Address of New Registered Agent Name RIZA, NABEEL A. Street Address (P.O. Box Number is Not Acceptable) 1862 ROYAL MAJESTY COURT City OVIEDO FL Zip Code 32765	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE Nov. 23, 07	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCD <input checked="" type="checkbox"/> Delete RIZA, NABEEL A 1025 S SEMORAN BLVD., STE. 1093 WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200112910752 12/06/07--01053--018 **70.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Delete PEREZ, FRANK 1025 S SEMORAN BLVD., STE. 1093 WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition FRANK PEREZ 1862 ROYAL MAJESTY COURT OVIEDO, FL 32765
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D AMANA BOKHARI-RIZA 1862 ROYAL MAJESTY COURT OVIEDO, FL 32765
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition C NABEEL A. RIZA 1862 ROYAL MAJESTY COURT OVIEDO, FL 32765
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		(NABEEL A. RIZA) Chairman Date Nov. 23, 2007 407-256-0028	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	