2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000055668

Entity Name: INNOVAMED USA, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1103 E. LEELAND HGTS. BLVD. 1103 LEELAND HGTS. BLVD. E LEHIGH ACRES, FL 33936 US LEHIGH ACRES, FL 33936 US

Current Mailing Address: New Mailing Address:

1103 E. LEELAND HGTS. BLVD. 1103 LEELAND HGTS. BLVD. E LEHIGH ACRES, FL 33936 US LEHIGH ACRES, FL 33936 US

FEI Number: 65-0929596 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CZADILEK, ERNST

1103 E. LEELAND HGTS BLVD.

LEHIGH ACRES, FL 33936 US

CZADILEK, ERNST

1103 LEELAND HGTS BLVD. E

LEHIGH ACRES, FL 33936 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: ERNST H.CZADILEK, PRESIDENT 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Name: CZADILEK, ERNST

Name: CZADILEK, ERNST Address: 1103 E. LEELAND HGTS. BLVD. City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP () Delete Name: WINKLER, KLAUS

Address: 1103 E. LEELAND HGTS. BLVD. City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

Name: CZADILEK, ERNST

Address: 1103 LEELAND HGTS. BLVD. E City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP (X) Change () Addition

Name: WINKLER, KLAUS

Address: 1103 LEELAND HGTS. BLVD. E City-St-Zip: LEHIGH ACRES, FL 33936

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: ERNST H.CZADILEK P 04/14/2005