

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095574

FILED
Mar 12, 2005
Secretary of State

Entity Name: CARDIOVASCULAR PERFUSION TECHNOLOGIES, INC.

Current Principal Place of Business:

1507 86TH CT. N.W.
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

1507 86TH CT. N.W.
BRADENTON, FL 34209

New Mailing Address:

FEI Number: 65-0958258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREAVES, M L
1507 86TH CT. N.W.
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GREAVES, M L
Address: 1507 86TH CT NW
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: MILLER, NICHOLAS M
Address: 5708 39TH ST CIRCLE E
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: M LANDON GREAVES

PRES

03/12/2005

Electronic Signature of Signing Officer or Director

Date