

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 446355

FILED
Jan 23, 2010
Secretary of State

Entity Name: CUBAN ORTHOPEDIC AND FOOT CLINIC, INC.

Current Principal Place of Business:

5841 W. FLAGLER STREET
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

5841 W. FLAGLER STREET
MIAMI, FL 33144

New Mailing Address:

FEI Number: 59-1514056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMS, JR V H
5940 SW 114 STREET
MIAMI, FL 33156 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: ST
Name: REYES, DORA Q.
Address: 10351 SW 60TH ST.
City-St-Zip: MIAMI, FL 33173

Title: P
Name: QUIRANTES, MARIA L
Address: 5940 SW 114 TERR.
City-St-Zip: MIAMI, FL 33156

I hereby 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 all other like empowered.

SIGNATURE: MARIA L QUIRANTES

P

01/23/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date