2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P02000013035

Entity Name: ALLIED ORTHOPEDICS, INC.

Current Principal Place of Business:

1460 WEST 68 STREET
SUITE #101
HIALEAH, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

2525 PONCE DE LEON BLVD.
SUITE 1225
CORAL GABLES, FL 33134 US

New Mailing Address:

1460 WEST 68 STREET
SUITE #101
HIALEAH, FL 33014 US

FEI Number: 42-1529009 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTERAMERICAN CORPORATE SERVICES LLC
2525 PONCE DE LEON BLVD.
SUITE 1225
CORAL GABLES, FL 33134 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: PT ( ) Delete
Name: LUNA, HERNAN
Address: 1460 WEST 68 STREET, SUITE #101
City-St-Zip: HIALEAH, FL 33014 US

Title: VPS ( ) Delete
Name: HERNANDEZ, PATRICIA M
Address: 1460 WEST 68 STREET, SUITE #101
City-St-Zip: HIALEAH, FL 33014 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: LUNA, HERNAN
Address: 1460 WEST 68 STREET, SUITE #101
City-St-Zip: HIALEAH, FL 33014 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: HERNAN LUNA P 04/28/2009

Electronic Signature of Signing Officer or Director Date