

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768605

Entity Name: MIAMI ORTHOPAEDIC SOCIETY, INC.

Current Principal Place of Business:

10656 NW 16TH COURT
PLANTATION, FL 33322

Current Mailing Address:

10656 NW 16TH COURT
PLANTATION, FL 33322 US

FEI Number: 59-1736480

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRAMER, ROBERT MESQ
4000 HOLLYWOOD BLVD
485-SOUTH
HOLLYWOOD, FL 33021 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	MGR
Name	REICHNER, GAYLE
Address	10656 NW 16 CT
City-State-Zip:	PLANTATION FL 33322
Title	VPD
Name	MONTANE, ISMAEL DR
Address	1172 S DIXIE HIGHWAY, STE. 357
City-State-Zip:	CORAL GABLES FL 33146

Title	MGR
Name	REICHNER, GAYLE
Address	10656 NW 16 CT
City-State-Zip:	PLANTATION FL 33322
Title	TD
Name	FERNANDEZ, RAFAEL DR
Address	1172 S DIXIE HIGHWAY, STE. 357
City-State-Zip:	CORAL GABLES FL 33146

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GAYLE REICHNER

MGR

03/17/2017

Electronic Signature of Signing Officer/Director Detail

Date