

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K83191

Entity Name: ALPHA ORTHO-CARE, INC.

Current Principal Place of Business:

1401 E 4TH AVE
STE 104
HIALEAH, FL 33010

Current Mailing Address:

1401 E 4TH AVE
STE 104
HIALEAH, FL 33010 US

FEI Number: 65-0117590

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUIRANTES JR, TULIO
1401 E 4TH AVE
SUITE 102
HIALEAH, FL 33010 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: TULIO QUIRANTES JR

04/15/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PTSD
Name QUIRANTES JR, TULIO
Address 1401 E 4TH AVE
SUITE 102
City-State-Zip: HIALEAH FL 33010

Title VP
Name QUIRANTES, MARIA
Address 1401 E 4TH AVE
SUITE 102
City-State-Zip: HIALEAH FL 33010

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: TULIO QUIRANTES JR

PTSD

04/15/2015

Electronic Signature of Signing Officer/Director Detail

Date