

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069350

Entity Name: PALM ORTHOPAEDIC INSTITUTE, INC.

Current Principal Place of Business:

1501 FOREST HILL BLVD.
STE 101
WEST PALM BEACH, FL 33406

Current Mailing Address:

1501 FOREST HILL BLVD.
STE 101
WEST PALM BEACH, FL 33406 US

FEI Number: 55-0791030

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMRO, R
1501 FOREST HILL BLVD.
STE. 101
WEST PALM BEACH, FL 33406 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: R AMRO

03/23/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PVST
Name AMRO, R
Address 1501 FOREST HILL BLVD. STE 101
City-State-Zip: WEST PALM BEACH FL 33406

Title D
Name AMRO, R
Address 1501 FOREST HILL BLVD STE 101
City-State-Zip: WEST PALM BEACH FL 33406

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: R AMRO

RA

03/23/2016

Electronic Signature of Signing Officer/Director Detail

Date