

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000063698

**Entity Name:** ORTHO 99 , INC

**Current Principal Place of Business:**

127 W/ FAIRBANKS  
#232  
WINTER PARL, FL, FL 32789

**Current Mailing Address:**

127 W/ FAIRBANKS  
#232  
WINTER PARL, FL, FL 32789

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GONZALEZ, JUAN A  
127 W. FAIRBANKS  
#232  
WINTER PARK, FL 32789 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 P  
Name GONZALEZ, JUAN A  
Address 127 W. FAIRBANKS. #232  
City-State-Zip: WINTER PARK FL 32789

Title VP  
Name PEREZ, MANUEL S  
Address 127 W. FAIRBANKS. #232  
City-State-Zip: WINTER PARK FL 32789

*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:** JUAN GONZALEZ

**PRESIDENT**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date