

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000002210

**Entity Name:** ORTHO TECHNOLOGY, INC.**Current Principal Place of Business:**1822 ASTON AVENUE  
CARLSBAD, CA 92008**Current Mailing Address:**1822 ASTON AVENUE  
CARLSBAD, CA 92008 US**FEI Number:** 45-5042500**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	DIRECTOR, SECRETARY, SENIOR VICE PRESIDENT
Name	ETTINGER, MICHAEL S
Address	C/O HENRY SCHEIN, INC 135 DURYEA ROAD E-365
City-State-Zip:	MELVILLE NY 11747

Title	DIRECTOR, EXECUTIVE VICE PRESIDENT
Name	MLOTEK, MARK E
Address	135 DURYEA RD
City-State-Zip:	MELVILLE NY 11747

Title	DIRECTOR, EXECUTIVE VICE PRESIDENT, CFO
Name	PALADINO, STEVEN
Address	135 DURYEA ROAD
City-State-Zip:	MELVILLE NY 11747

Title	PRESIDENT
Name	BRESLAWSKI, JAMES P
Address	135 DURYEA ROAD
City-State-Zip:	MELVILLE NY 11747

*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: MICHAEL S. ETTINGER****SECRETARY****04/21/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date