

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001401

**Entity Name:** INTEGRITY IMPLANTS INC.**Current Principal Place of Business:**850 PARKWAY ROAD  
JUPITER, FL 33477**Current Mailing Address:**850 PARKWAY ROAD  
JUPITER, FL 33477 US**FEI Number:** 81-1898935**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRUSH & SACKS  
7210 WISTERIA AVE.  
PARKLAND, FL 33076 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 DCEO  
Name WALSH, CHRISTOPHER  
Address 5270 PENNOCK POINT ROAD  
City-State-Zip: JUPITER FL 33458

Title DIRECTOR  
Name BIRKMEYER, PAUL  
Address 850 PARKWAY ROAD  
City-State-Zip: JUPITER FL 33477

Title DIRECTOR  
Name LIPES, NED  
Address 850 PARKWAY ROAD  
City-State-Zip: JUPITER FL 33477

Title DIRECTOR  
Name SPANGLER, JONATHAN  
Address 850 PARKWAY ROAD  
City-State-Zip: JUPITER FL 33477

Title DP  
Name GEIST, WYATT DRAKE  
Address 2621 W ABIACA CIRCLE  
City-State-Zip: DAVIE FL 33328

Title DIRECTOR  
Name YUAN, HANSEN DR.  
Address 850 PARKWAY ROAD  
City-State-Zip: JUPITER FL 33477

Title DIRECTOR  
Name WARD, NATE  
Address 850 PARKWAY ROAD  
City-State-Zip: JUPITER FL 33477

Title SECRETARY  
Name BRITTO, LISA  
Address 850 PARKWAY ROAD  
City-State-Zip: JUPITER FL 33477

**Continues on page 2**

*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: CHRISTOPHER WALSH****CEO****04/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	TREASURER
Name	DELEO, DEREK
Address	12 ASPETUCK AVENUE
City-State-Zip:	NEW MILFORD CT 06776