2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 422249

Entity Name: RX CASTILLO ORTHOPEDIC CENTER, INC.

FILED Mar 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3183 SW 8TH STREET 3181 SW 8TH STREET MIAMI, FL 33135 MIAMI, FL 33135

Current Mailing Address: New Mailing Address:

3183 SW 8TH STREET 3181 SW 8TH STREET MIAMI, FL 33135 MIAMI, FL 33135

FEI Number: 59-1452843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CASTILLO, JOSE DEL DEL CASTILLO, JOSE 13340 SW 32ND STREET 13340 SW 32ND STREET MIAMI, FL 33175 MIAMI, FL 33175

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: JOSE DEL CASTILLO 03/19/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CASTILLO, JOSE DEL DEL CASTILLO, JOSE Name: Name:

953 NW 133 COURT 13340 S.W. 32 ST. Address: Address: City-St-Zip: MIAML FL City-St-Zip: MIAMI, FL 33175

Title: VΡ Title: VΡ () Delete (X) Change () Addition DEL CASTILLO, VICKY Name: CASTILLO, VICKY DEL Name:

13340 S.W. 32 ST. 953 NW 133 COURT Address: Address: MIAMI, FL

MIAMI, FL City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition CASTILLO, JOSE DEL DEL CASTILLO, JOSE Name: Name:

953 NW 133 COURT 13340 S.W. 32 ST Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33175

Title: () Delete Title: (X) Change () Addition

DEL CASTILLO, VICKY CASTILLO, VICKY DEL Name: Name: Address: 953 NW 133 COURT Address: 13340 S.W. 32 ST. City-St-Zip: City-St-Zip: MIAMI, FL MIAMI, FL 33175

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSE DEL CASTILLO **PRES** 03/19/2007