

2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A06000000811

FILED
Mar 25, 2008
Secretary of State

Entity Name: SOUTH FLORIDA ORTHOPAEDIC AND PAIN MANAGEMENT LIMITED

Current Principal Place of Business:

301 CAMINO GARDENS BOULEVARD
SUITE 201
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

301 CAMINO GARDENS BOULEVARD
SUITE 201
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 20-5063582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESCOBAR, XAVIER
301 CAMINO GARDENS BOULEVARD
#201
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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

GENERAL PARTNER INFORMATION:

Document #: L06000011370
Name: KATZMAN'S ARMS, ANTIQUES AND FURNISHINGS
Address: 2401 FRIST BOULEVARD, SUITE 7
City-St-Zip: FORT PIERCE, FL 34950 US

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: XAVIER ESCOBAR

PRES

03/25/2008

Electronic Signature of Signing General Partner

Date