

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A93000000516

**FILED**  
**Apr 28, 2005**  
**Secretary of State**

**Entity Name:** DADE ORTHOPAEDIC MANAGEMENT, LTD.

**Current Principal Place of Business:**

MIAMI HEART  
4701 N. MEDRIDIAN AVE., #4210  
MIAMI BEACH, FL 33140 US

**New Principal Place of Business:**

**Current Mailing Address:**

MIAMI HEART  
4701 N. MEDRIDIAN AVE., #4210  
MIAMI BEACH, FL 33140 US

**New Mailing Address:**

**FEI Number:** 65-0411040      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BALWANT CHEEMA, P.A.  
4160 WEST 16TH AVENUE., SUITE 309  
HIALEAH, FL 33012 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

**Capital Contributions as Shown on record:** 990.00  
**Amount of Capital Contributions in Florida to date:** 990.00

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: BHANDARI, RAMDAS  
Address: 4701 N. MERIDIAN AVE., #4210  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAMDAS BHANDARI

GP

04/28/2005

Electronic Signature of Signing General Partner

\_\_\_\_\_ Date