2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2007
Secretary of State

DOCUMENT# F05000006821

Entity Name: ORTHOPEDIC SYSTEMS, INC.

Current Principal Place of Business:

30031 AHERN AVE
UNION CITY, CA 94587

New Principal Place of Business:

Current Mailing Address:

30031 AHERN AVE
UNION CITY, CA 94587

New Mailing Address:

FEI Number: 94-2405390 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NEMOTO, TATSUYA
Address: 30 - 13 HONGO 3-CHOME
City-St-Zip: BUNKYO-KU, TOKYO, 133 JAPAN,

Title: C ( ) Delete
Name: NEMOTO, TAKASHI
Address: 30 - 13 HONGO 3-CHOME
City-St-Zip: BUNKYO-KU, TOKYO, 133, JAPAN, XX XX

Title: V ( ) Delete
Name: LAMB, STEVE
Address: 30031 AHERNAVE
City-St-Zip: UNION CITY, CA 94587

Title: S ( ) Delete
Name: TAKAGAKI, ATSUSHI ANDREW
Address: 30031 AHERNAVE
City-St-Zip: UNION CITY, CA 94587

Title: T ( ) Delete
Name: YAMAMURA, SHIGERU
Address: 30031 AHERNAVE
City-St-Zip: UNION CITY, CA 94587

Title: D ( ) Delete
Name: NEMOTO, TOHRU
Address: 30 - 13 HONGO 3-CHOME
City-St-Zip: BUNKYO-KU, TOKYO 133, JAPAN, XX XX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SHIGERU YAMAMURA CFO 02/21/2007

Electronic Signature of Signing Officer or Director Date