

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H20002

FILED
Jul 16, 2004
Secretary of State

Entity Name: NEMEROFSKY ORTHOPAEDICS, P.A.

Current Principal Place of Business:

6121 BANYAN TERR
FORT LAUDERDALE, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 17620
PLANTATION, FL 33318 US

New Mailing Address:

FEI Number: 59-2443549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEMEROFSKY, STEPHEN L., M.D.
6121 BANYAN TERRACE
PLANTATION, FL 33317 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NEMEROFSKY, STEPHEN, L.MD
Address: 6121 BANYAN TERRACE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: NEMEROFSKY, STEPHEN, L.MD
Address: 6121 BANYAN TERRACE
City-St-Zip: PLANTATION, FL 33317

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 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: STEPHEN L. NEMEROFSKY

PRES

07/16/2004

Electronic Signature of Signing Officer or Director

Date