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COF ANNU	PROFIT RPORATION UAL REPORT 1996			LORIDA DEPA Sandra	RTMENT B. Mortha	OF STATE.					
<ol> <li>Corporation</li> </ol>	MENT # n Name n Orthoti	L40137 c & Prost	thetic	e Servi	ces,	Inc.		100001 -05/28/96 ***200,00	<b>840</b> 4 01027	<b>181</b> 005	
Principal Place 250 S Suite Venice	. Tamiami 102	Trai1 285	Mailing A	ddress	• • • • • • • • • • • • • • • • • • • •		3. D	Date Incorporated or Qua	ified <b>3a</b> . D	ate of Last R	enort L
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Venice	, Florida	a 34292		- 00 00	•	83					
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11. Pursuant t	to the provisions of S	ections 607.0502 an	nd 607,1508	, Florida Statute	s, the abo		prporation sub	omits this statement for the	<u>_</u>	L	
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100 neterol centry that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an auto-thinent with an address.

SIGNATURE:

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