

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44691

FILED
Jul 12, 2012
Secretary of State

Entity Name: GOLDEN ORTHOPAEDIC KNEE AND SPORTS MEDICINE CENTER, INC.

Current Principal Place of Business:

9970 CENTRAL PARK BLVD S.
SUITE 300
BOCA RATON, FL 33428 US

New Principal Place of Business:

Current Mailing Address:

818 NE ORCHID BAY DRIVE
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 65-0169490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDEN, MARC D.
818 NE ORCHID BAY DRIVE
BOCA RATON, FL 33487 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: GOLDEN, MARC DR.
Address: 818 NE ORCHID BAY DRIVE
City-St-Zip: BOCA RATON, FL 33487

Title: TREA
Name: GOLDEN, JULIE
Address: 818 NE ORCHID BAY DRIVE
City-St-Zip: BOCA RATON, FL 33487

Title: SEC
Name: PIZA, PEDRO
Address: 818 NE ORCHID BAY DRIVE
City-St-Zip: BOCA RATON, FL 33487

I hereby 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 all other like empowered.

SIGNATURE: MARC D. GOLDEN

PRES

07/12/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date