

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000095747

FILED  
Jul 01, 2005  
Secretary of State

Entity Name: KENDALL ORTHOPEDICS CORP.

**Current Principal Place of Business:**

900 W. 49TH STREET  
SUITE 536  
HIALEAH, FL 33012

**New Principal Place of Business:**

3621 SW 149 PL  
MIAMI, FL 33185

**Current Mailing Address:**

900 W. 49TH STREET  
SUITE 536  
HIALEAH, FL 33012

**New Mailing Address:**

3621 SW 149 PL  
MIAMI, FL 33185

FEI Number: 65-1050392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEREZ, MARIA V  
900 W.49 STREET  
SUITE 536  
HIALEAH, FL 33012 US

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

PEREZ, MARIA V  
3621 SW 149 PL  
MIAMI, FL 33185 US

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: MARIA V PEREZ

07/01/2005

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: PD ( ) Delete  
Name: PEREZ, MARIA V  
Address: 900 W.49 STREET ,SUITE 536  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: PEREZ, MARIA V  
Address: 3621 SW 149 PL  
City-St-Zip: MIAMI, FL 33185

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: MARIA V PEREZ

PD

07/01/2005

Electronic Signature of Signing Officer or Director

Date