

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000077979

Entity Name: GONZALEZ ORTOPEDIA, INC.

FILED
Feb 19, 2004
Secretary of State

Current Principal Place of Business:

1100 W 29 ST
HIALEAH, FL 33012

New Principal Place of Business:

1490 W 49 PL
SUITE # 550
HIALEAH, FL 33012 US

Current Mailing Address:

1100 W 29 ST
HIALEAH, FL 33012

New Mailing Address:

1490 W 49 PL
SUITE # 550
HIALEAH, FL 33012 US

FEI Number: 65-1135760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

QUINTERO, MARITZA
1100 WEST 29 ST.
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

QUINTERO, MARITZA
1490 W 49 PL.
SUITE # 550
HIALEAH, FL 33012 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: MARITZA QUINTERO

02/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: QUINTERO, MARITZA
Address: 1100 WEST 29 ST. SUITE D
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARITZA QUINTERO

PD

02/19/2004

Electronic Signature of Signing Officer or Director

Date