

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002754

FILED
Mar 07, 2005
Secretary of State

Entity Name: FALCON ORTHOPEDICS CORP.

Current Principal Place of Business:

1490 WEST 49TH PLACE
SUITE 350
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1490 WEST 49TH PLACE
SUITE 350
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 30-0016996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARO, OSLAIDY
1490 WEST 49TH PLACE
SUITE 350
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

IGLESIAS, MANUEL E ESQ
121 ALHAMBRA PLAZA
10 FLOOR
CORAL GABLES, FL 33134 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: MANUEL E IGLESIAS

03/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: HARO, OSLAIDY
Address: 1490 WEST 49TH PLACE , SUITE 350
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: HERRERA, DANIEL L
Address: 1490 WEST 49TH PLACE , SUITE 350
City-St-Zip: HIALEAH, FL 33012

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: DANIEL L HERRERA

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03/07/2005

Electronic Signature of Signing Officer or Director

Date