


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90237 035 ***158.75

DOCUMENT # P02000088564 1. Entity Name CMC ORTHOPAEDIC CONSULTANTS, INC.																																			
Principal Place of Business 9753 SW 157 CT. MIAMI, FL 33196		Mailing Address 9753 SW 157 CT. MIAMI, FL 33196																																	
2. Principal Place of Business 16275 SW 88 ST Suite, Apt. #, etc. # 141		3. Mailing Address 16275 SW 88 ST Suite, Apt. #, etc. # 141																																	
City & State MIAMI FL		City & State MIAMI																																	
Zip Country 33196 USA		Zip Country 33196 USA																																	
4. FEI Number 42-1550311		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent CALDERIN, CIRO 9753 SW 157 CT. MIAMI, FL 33196		7. Name and Address of New Registered Agent Name CALDERIN, CIRO Street Address (P.O. Box Number is Not Acceptable) 16275 SW 88 ST # 141 City MIAMI FL Zip Code 33196																																	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>[Signature]</i></u> Ciro Calderin 3/12/04 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust/Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> PTD CALDERIN, CIRO 9753 SW 157 CT. MIAMI, FL 33196 <input type="checkbox"/> Delete </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CALDERIN, CIRO 9753 SW 157 CT. MIAMI, FL 33196 <input type="checkbox"/> Delete															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 16275 SW 88 ST # 141 MIAMI, FL 33196 </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 16275 SW 88 ST # 141 MIAMI, FL 33196														
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: <u><i>[Signature]</i></u> Ciro Calderin 3/12/04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																			

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