

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117488

FILED
Jan 12, 2004
Secretary of State

Entity Name: IMPERIAL ORTHOTICS MEDICAL CENTER INC.

Current Principal Place of Business:

266 E 51 STREET
HIALEAH, FL 33013

New Principal Place of Business:

11117 W. OKEECHOBEE RD
#111
HIALEAH GARDENS, FL 33018

Current Mailing Address:

266 E 51 STREET
HIALEAH, FL 33013

New Mailing Address:

11117 W. OKEECHOBEE RD
#111
HIALEAH GARDENS, FL 33018

FEI Number: 01-0751677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROJAS, MARIO
266 E 51 STREET
HIALEAH, FL 33013

Name and Address of New Registered Agent:

ROJAS, MARIO
11117 W. OKEECHOBEE RD
#111
HIALEAH GARDENS, FL 33018

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: MARIO ROJAS

01/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROJAS, MARIO
Address: 266 E 51 STREET
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROJAS, MARIO
Address: 11117 W. OKEECHOBEE RD #111
City-St-Zip: HIALEAH GARDENS, FL 33018

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: MARIO ROJAS

P/D

01/12/2004

Electronic Signature of Signing Officer or Director

Date