

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034620

FILED
Jan 30, 2012
Secretary of State

Entity Name: ORTHOPEDIC, TRAUMATOLOGY & REHAB CENTER, INC.

Current Principal Place of Business:

9950 SW 40TH ST.
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9950 SW 40TH ST.
MIAMI, FL 33165

New Mailing Address:

FEI Number: 04-3749852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLIEGO, MARIA R
9950 SW 40TH ST.
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PLIEGO, MARIA R
Address: 9950 SW 40TH ST.
City-St-Zip: MIAMI, FL 33165

Title: V
Name: CORO, IGNACIO
Address: 9950 SW 40TH ST.
City-St-Zip: MIAMI, FL 33165

I hereby 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 all other like empowered.

SIGNATURE: MARIA PLIEGO

PD

01/30/2012

Electronic Signature of Signing Officer or Director

Date