

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054011

FILED  
May 09, 2006  
Secretary of State

Entity Name: SPINAL CONCEPTS OF FLORIDA, INC.

## Current Principal Place of Business:

4362 NORTHLAKE BLVD  
SUITE 211  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

2240 W. WOOLBRIGHT ROAD  
SUITE 211  
BOYNTON BEACH, FL 33426

## Current Mailing Address:

4362 NORTHLAKE BLVD  
SUITE 211  
PALM BEACH GARDENS, FL 33410

## New Mailing Address:

2240 W. WOOLBRIGHT ROAD  
SUITE 211  
BOYNTON BEACH, FL 33426

FEI Number: 55-0832712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KAIRIS, STEVEN J  
Address: 493 PRESTWICK CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D ( ) Delete  
Name: OROFINO, PAUL  
Address: 6662 BOCA DEL MAR, APT #414  
City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: WHITAKER, JAY K  
Address: 217 FLAME AVE  
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEVEN J. KAIRIS

D

05/09/2006

Electronic Signature of Signing Officer or Director

Date