2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# P03000103147

Entity Name: AVENTURA ORTHOPAEDICS AND SPORTS MEDICINE, P.A.

Current Principal Place of Business:

20601 EAST DIXIE HIGHWAY
SUITE 330
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 801734
AVENTURA, FL 33280 US

New Mailing Address:

FEI Number: 41-2109343 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, BRAD K
3610 YACHT CLUB DRIVE
APT. 505
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

COHEN, BRAD K
21055 YACHT CLUB DRIVE
APT. 2004
AVENTURA, FL 33180 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: BRAD K COHEN 01/08/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COHEN, BRAD K
Address: 20601 EAST DIXIE HIGHWAY, SUITE 330
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: BRAD K COHEN D 01/08/2008
Electronic Signature of Signing Officer or Director Date