

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103147

FILED
Mar 29, 2012
Secretary of State

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
3728 NE 209TH TERRACE
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

COHEN, BRAD K
3370 NE 190TH STREET
TS 1801
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

03/29/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: COHEN, BRAD K
Address: 3370 NE 190TH STREET, TS 1801
City-St-Zip: AVENTURA, FL 33180 US

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: BRAD K COHEN

D

03/29/2012

Electronic Signature of Signing Officer or Director

Date