

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158657

Entity Name: FOCUS ORTHOPEDICS INC

FILED
Jul 13, 2007
Secretary of State

Current Principal Place of Business:

2105 HARDWOOD MARSH RD., STE. 7
CLERMONT, FL 347120550

New Principal Place of Business:

2105 HARTWOOD MARSH RD., STE. 7
CLERMONT, FL 347120550

Current Mailing Address:

2105 HARDWOOD MARSH RD., STE. 7
CLERMONT, FL 347120550

New Mailing Address:

2105 HARTWOOD MARSH RD., STE. 7
CLERMONT, FL 347120550

FEI Number: 20-1919671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSIEH, MIKE M.D.
908 BLUE SAGE STREET
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

MESSIEH, MIKE M.D.
4327 S HWY 27 BOX 321
CLERMONT, FL 34711 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:

07/13/2007

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: MESSIEH, MIKE MD
Address: 908 BLUE SAGE STREET
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MESSIEH, MIKE MD
Address: 4327 S HWY 27 BOX 321
City-St-Zip: CLERMONT, FL 34711

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: MIKE MESSIEH

MD

07/13/2007

Electronic Signature of Signing Officer or Director

Date