## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000039099

**FILED** Feb 22, 2010 Secretary of State

Entity Name: INSTITUTE OF SPORTS MEDICINE AND ORTHOPAEDICS, P.A.

**Current Principal Place of Business: New Principal Place of Business:** 

20295 NE 29TH PLACE 20295 NE 29TH PLACE

TURNBERRY BANK BUILDING, SUITE 300 SUITE 300

AVENTURA, FL 33180 AVENTURA, FL 33180

**Current Mailing Address: New Mailing Address:** 

20295 NE 29TH PLACE 20295 NE 29TH PLACE TURNBERRY BANK BUILDING, SUITE 300 SUITE 300

AVENTURA, FL 33180 AVENTURA, FL 33180

FEI Number: 20-4524288 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KURZWEIL, HOWARD E TOWER 101, SUITE 1700 101 NORTHEAST THIRD AVENUE FT. LAUDERDALE, FL 33301 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

GORIN, STEVEN Name:

20295 NE 29TH PLACE, SUITE 300 Address:

City-St-Zip: AVENTURA, FL 33180

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: STEVEN GORIN **PRES** 02/22/2010