

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000022884

FILED
Apr 02, 2012
Secretary of State

Entity Name: ORTHO MEDICAL SERVICES, INC.

Current Principal Place of Business:

3710 W. EUCLID AVE.
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

3710 W. EUCLID AVE.
TAMPA, FL 33629

New Mailing Address:

FEI Number: 45-1460712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIELO, TODD DR.
3710 W. EUCLID AVE.
TAMPA, FL 33629 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

OFFICERS AND DIRECTORS:

Title: PVPS
Name: CIELO, TODD DR.
Address: 3710 W. EUCLID AVE.
City-St-Zip: TAMPA, FL 33629

Title: TD
Name: CIELO, TODD DR.
Address: 3710 W. EUCLID AVE.
City-St-Zip: TAMPA, FL 33629

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: TODD J. CIELO

DR.

04/02/2012

Electronic Signature of Signing Officer or Director

Date