SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

0076119

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
98 AUG -4 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000012599 (6)

1. Corporation Name
ORTHOTIC & PROSTHETIC REHABILITATION TECHNOLOGIE S, INC.

Principal Place of Business	Mailing Address
1509 PROSPERITY FARMS LAKE PARK FL 33403 US	1509 PROSPERITY FARMS ROAD LAKE PARK FL 33403 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/14/1992
4. FEI Number: 65-0375414 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26 1016 W. Ninth Ave
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 King of Prussia PA
Zip 24 Country 25	Zip 29 19406 Country 30

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL

100002600411--0
-08/05/98--01102--016
****550.00 ****550.00

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE ____________________ DATE ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D NAME: GRUBBS, ROBERT W STREET ADDRESS: 10546 158TH ST., N. CITY-ST-ZIP: JUPITER FL	☑ DELETE	1.1 TITLE: D, P 1.2 NAME: Hiscock, Ronald G. 1.3 STREET ADDRESS: 1016 W. Ninth Ave. 1.4 CITY-ST-ZIP: King of Prussia PA 19406	☐ Change ☑ Addition
TITLE: D NAME: SINCLAIR, WILLIAM F STREET ADDRESS: 8567 SE MERRITT WAY CITY-ST-ZIP: JUPITER FL 33458	☑ DELETE	2.1 TITLE: D, T 2.2 NAME: Fitzpatrick, Dennis J. 2.3 STREET ADDRESS: 1016 W. Ninth Ave. 2.4 CITY-ST-ZIP: King of Prussia PA 19406	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE: D, VP 3.2 NAME: Harsh, Nicholas J. 3.3 STREET ADDRESS: 1016 W. Ninth Ave. 3.4 CITY-ST-ZIP: King of Prussia PA 19406	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE: S 4.2 NAME: Binstein, Richard S. 4.3 STREET ADDRESS: 1016 W. Ninth Ave. 4.4 CITY-ST-ZIP: King of Prussia PA 19406	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (5/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Richard S. Binstein, Secretary 7/31/98 (610)992-7200