

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000019568

FILED
Jan 06, 2004
Secretary of State

Entity Name: ORTHOPEDIC FIXATION SYSTEMS, INC.

Current Principal Place of Business:

P O BOX 2532
PALM CITY, FL 34990 US

New Principal Place of Business:

3533 SW CORPORATE PKWY.
PALM CITY, FL 34990 US

Current Mailing Address:

P O BOX 2532
PALM CITY, FL 34990 US

New Mailing Address:

P O BOX 2532
PALM CITY, FL 34991 US

FEI Number: 65-0737701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDEN, JEFF
3533 S.W. CORPORATE PARKWAY
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

GOLDEN, JEFF
3533 S.W. CORPORATE PARKWAY
PALM CITY, FL 34991 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:

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR () Change (X) Addition
Name: GOLDEN, JEFFREY S
Address: 3533 SW CORPORATE PKWY
City-St-Zip: PALM CITY, FL 34990 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEFFREY SCOTT GOLDEN

MR

01/06/2004

Electronic Signature of Signing Officer or Director

Date