## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 20, 2005 8:00 am Secretary of State DOCUMENT # P97000095737 04-20-2005 90321 008 \*\*\*150.00 DIPLOMAT ORTHOPAEDIC GROUP, P.A. Principal Place of Business Mailing Address 1470 S FEDERAL HAY 50039267 1470 S FEDERAL HAY HOLLWOOD FL 33020 HOLLYWOOD FL 33020 CR2E034 (10/03) 03162005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0832033 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE LANGONE, MICHAEL A MD 1420 S. FEDERAL HWY HOLLYWOOD, FL 33020 IN THIS SPACE The state of the s 8. 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. I am familiar with, and accept the obligations of regis 4805 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE LANGONE, MICHAEL NAME 1420 S. FEDERAL HWY STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE NAME STREET ADDRESS CITY -ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED