

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001901

FILED
Apr 18, 2011
Secretary of State

Entity Name: FLEXIBLE PROSTHETICS, INC.

Current Principal Place of Business:

789 PINE ST
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

789 PINE ST
OCOEE, FL 34761

New Mailing Address:

FEI Number: 59-3492152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

H&R BLOCK PREMIUM
1650 SANDLAKE RD
STE 108
ORLANDO, FL 32809 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: O
Name: SITARIK, STEVEN F
Address: 789 PINE ST
City-St-Zip: OCOEE, FL 34761

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 SITARIK

PRES

04/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date