FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

• PROFIT CORPORATION * ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V19170 1. Corporation Name

ORTHO CONCEPTS, INC.

| FILED | | | | | | | | |
|---------------------|--|--|--|--|--|--|--|--|
| Feb 12, 1999 8:00am | | | | | | | | |
| Secretary of State | | | | | | | | |

02-12-1999 90007 031 *** 150.00



| Principal Place | of Business | Mailing Address | | | | | | |
|---|---|---|------------|-------------------------|--|-------------------------------------|---------------------------|-----|
| 8780 N. KENDALL DR Suite 206 Miami Fl 33176 | | 8720 N. KENDALL DR. Suite 206 Miami Fl. 33176 | | DO NOT WRITE IN TH | IIS SPACE | | | |
| US | | US | | | 3. Date Incorporated or Qualifed 03/06/1992 | | | |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | | 4. FEI Number 65-0322389 | Not | plied For t Applicable | 60 |
| Suite, Apt. 1 | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 A Fee Re | quired | |
| City & State | 9 | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 Added to | - 1 | |
| Zip 24 | Country 25 | | 30 Cou | ntry | This corporation owes the current year Personal Property Tax. Name and Address of New Registers | Yes | □No | |
| | 9. Name and Address of Curren | t Registered Agent | | 81 Name | 10. Name and Address of New Registers | a Agent | | |
| VD41 | JED DODEDT M | | | Name | | | | |
| 4000 | Mer, robert M. Hollywood BLVD E 485 South | | | | ress (P.O. Box Number is Not Acceptable) | <u> </u> | | |
| | | | | 83 | | | | ı |
| | LYWOOD FL 33021 | | | 84 City | F | | | |
| office or no agent. 1 au | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga | or Fiorida: Silich Chande was al | IIIIOIIZGU | DY HIS COIDCIAN | poration submits this statement for the purpose on's board of directors. I hereby accept the applications in the control of th | of changing its pointment as reg | registered gistered | |
| SIGNATURE | | | | | ed when reinstating) DATE | · . | | ١. |
| | Signature, typed or printed name of registered ager | | | Agent signature require | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | PS IN 12 | Š |
| 12. | | D DIRECTORS DELETE | 13. | 15 | ADDITIONS/CHANGES TO CITYOENS | ☐ Change | Addition | - T |
| TITLE | D DUICE D | | 1.2 NA | | | | | 3 |
| NAME | WILK, BRUCE R. | | | REET ADDRESS | | | | ١٤ |
| STREET ADDRESS | 8720 N. KENDALL DR STE 206 | | | | | | | 6 |
| CITY-ST-ZIP | MIAMI FL | ☐ DELETÉ | 2.1 TI | ry-st-zip | | ☐ Change | ☐ Addition | (|
| TITLE | D STENDAGE SEEEDEN T | | | | | .— • | _ | |
| NAME | STENBACK, JEFFREY T. | , | 2.2 NA | REET ADDRESS | | | | ĺ |
| STREET ADDRESS | 8720 N. KENDALL DR. STE 20 |) | | | • | | | ĺ |
| CITY-ST-ZIP | MIAMI FL | ☐ DELETE | 3.1 TO | TY-ST-ZIP | · · · · · · · · · · · · · · · · · · · | ☐ Change | Addition | |
| TITLE | | | 3.2 N | 1 | | | , | |
| NAME . | | | R | REET ADDRESS | N | a.v. o de e e e | Sheer was the | |
| STREET ADDRESS | ·- ·, | | | TY-ST-ZIP | | 有月野 动 | | |
| CITY-ST-ZIP | | □ DELETE | 4.1 TI | | 3, 3, 3, 3, 4, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, | . Change | Addition | |
| TITLE | | | 4. 2 N | | | | | |
| NAME . | ľ | | 1 | REET ADDRESS | | | | |
| STREET ADDRESS | | | | TY-ST-ZIP | | | | |
| CITY-ST-Z#P | | ☐ DELETE | 5.1 TI | | | Change | Addition | 1 |
| TITLE | | _ 5 | 5.2 N | I . | | | | |
| NAME | | | | REET ADDRESS | • | | | |
| STREET ADDRESS | | | | TY-ST-ZIP | | | | - |
| CITY-ST-ZIP | | ☐ DELETE | 6.1 TI | | | ☐ Change | ☐ Addition | { |
| TITLE | | _, 5562,6 | 6.2 N | AME | | | | ĺ |
| NAME | : | 1 | | REET ADDRESS | | | | ĺ |
| STREET ADDRESS | | // | | | | | | ļ |

CITY-ST-ZIP 14. I hereby certify that the information supplied with this ding 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 supplier that a must 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed, or