2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601373

Entity Name: ORTHOPEDIC SPECIALISTS OF SOUTH FLORIDA, P.A.

FILED
Jan 04, 2024
Secretary of State
5292508529CC

Current Principal Place of Business:

7100 WEST 20TH AVE.

SUITE 101

HIALEAH, FL 33016

Current Mailing Address:

7100 WEST 20TH AVE.

SUITE 101

HIALEAH, FL 33016 US

FEI Number: 59-1272217 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EASTERLING, KENNETH J PRESIDENT 7100 WEST 20TH AVE, STE 101 HIALEAH, FL 33016 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: KENNETH J. EASTERLING, M.D. 01/04/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Name

Title PRESIDENT-DIRECTOR Title VICE PRESIDENT, TREASURER,

EASTERLING, KENNETH J M.D.

DIRECTOR

Name KRIKORIAN,, ENRIQUE MD Address 7100 WEST 20TH AVE.

SUITE 101 Address 7100 W. 20TH AVENUE SUITE 101

City-State-Zip: HIALEAH FL 33016 City-State-Zip: HIALEAH FL 33016

Title VICE PRESIDENT, SECRETARY, Title VICE PRESIDENT, DIRECTOR

DIRECTOR
Name
DIAZ, TONY DO
Address
DIAZ, TONY DO
Address
7100 WEST 20 AVE ROOM 101

Address 7100 W. 20TH AVENUE SUITE 101 City-State-Zip: HIALEAH FL 33016

City-State-Zip: HIALEAH FL 33016

Title VICE PRESIDENT, DIRECTOR

Name VARA, ALEXANDER MD

Address 7100 WEST 20TH AVE.

SUITE 101

City-State-Zip: HIALEAH FL 33016

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: KENNETH EASTERLING, MD

PRESIDENT

01/04/2024