

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08745

Entity Name: SOUTH DADE ORTHOPAEDIC ASSOCIATES, P.A.

Current Principal Place of Business:

2525 PONCE DE LEON BOULEVARD
FIFTH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

2525 PONCE DE LEON BOULEVARD
FIFTH FLOOR
CORAL GABLES, FL 33134

FEI Number: 59-2417574

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPRITZER, MICHAEL
2525 PONCE DE LEON BOULEVARD
FIFTH FLOOR
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name LANG, ELLIOT N.
Address 7867 N. KENDALL DRIVE STE 130
City-State-Zip: MIAMI FL 33156

Title DVST
Name EVANS, THEODORE A.
Address 7867 N. KENDALL DRIVE STE 130
City-State-Zip: MIAMI FL 33156

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: EVANS THEODORE

DVST

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date