

2013 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000040380

Entity Name: SOUTH BEACH ORTHOTICS AND PROSTHETICS, INC.

Current Principal Place of Business:

975 ARTHUR GODFREY RD, STE 102
MIAMI BEACH, FL 33140

Current Mailing Address:

3350 NW 2ND AVE
STE B-18
BOCA RATON, FL 33431 US

FEI Number: 20-0835152

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SELLECK, MARK T
3350 NW 2ND AVE
STE B18
BOCA RATON, FL 33431 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: MARK SELLECK

10/16/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PS
Name SELLECK, MARK
Address 3350 NW 2ND AVE
STE B-18
City-State-Zip: BOCA RATON FL 33431

Title VP, COO
Name RUDDER, JASON
Address 6545 NOVA DRIVE
STE 203
City-State-Zip: DAVIE FL 33317

Title CFO
Name LOWE, PAUL
Address 3350 NW 2ND AVE
STE B-18
City-State-Zip: BOCA RATON FL 33431

Title CAO
Name LOPEZ, VERONICA
Address 3350 NW 2ND AVE
STE B-18
City-State-Zip: BOCA RATON FL 33431

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: MARK SELLECK

PRESIDENT

10/16/2013

Electronic Signature of Signing Officer/Director Detail

Date