Entity Name: SOUTH BEACH ORTHOTICS AND PROSTHETICS, INC.

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

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

Current Mailing Address:

DOCUMENT# P04000040380

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

FEI Number: 20-0835152

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

Electronic Signature of Registered Agent

Officer/Director Detail :

Title PS SELLECK, MARK Name 3350 NW 2ND AVE Address 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

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

01/15/2018

Date

PRESIDENT

01/15/2018