

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036578

Entity Name: HAND SURGERY INSTITUTE, INC.

Current Principal Place of Business:

2055 MILITARY TRAIL, SUITE 204
JUPITER, FL 33458

Current Mailing Address:

2055 MILITARY TRAIL, SUITE 204
JUPITER, FL 33458 US

FEI Number: 65-0837976

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HANLON, M. TIMOTHY
321 ROYAL POINCIANA PLAZA
PALM BEACH, FL 33480 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 D
Name ACOSTA, ROBERTO J. DR.
Address 863 COUNTRY CLUB DRIVE
City-State-Zip: NORTH PALM BEACH FL 33408

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: ROBERTO ACOSTA

PRESIDENT

03/11/2025

Electronic Signature of Signing Officer/Director Detail

Date