

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000016982

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** BACK IN HARMONY CHIROPRACTIC AND WELLNESS CENTER, LLC

**Current Principal Place of Business:**

9960 PINES BOULEVARD  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

1961 NW 180TH WAY  
PEMBROKE PINES, FL 33029 US

**New Mailing Address:**

FEI Number: 27-1900049

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHONG, WEI SHEEN DC.  
1961 NW 180TH WAY  
PEMBROKE PINES, FL 33029 US

**Name and Address of New Registered Agent:**

CHONG, WEI SHEEN D.C.  
1961 NW 180TH WAY  
PEMBROKE PINES, FL 33029 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: WEI SHEEN CHONG

01/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHONG, WEI SHEEN D.C.  
Address: 1961 NW 180TH WAY  
City-St-Zip: PEMBROKE PINES, FL 33029 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WEI SHEEN CHONG

MGRM

01/06/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date