

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105487

FILED
Feb 21, 2004
Secretary of State

Entity Name: ADAM M. SHAPKIN, D.C. P.A.

Current Principal Place of Business:

8343 SW 5TH STREET
APT 101
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

8343 SW 5TH STREET
APT 101
PEMBROKE PINES, FL 33025

New Mailing Address:

5239 SW 40TH AVENUE
FORT LAUDERDALE, FL 33314

FEI Number: 65-1149382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAPKIN, ADAM M
8343 SW 5TH STREET
APT 101
PEMBROKE PINES, FL 33025

Name and Address of New Registered Agent:

SHAPKIN, ADAM M D.C.
5239 SW 40TH AVENUE
FORT LAUDERDALE, FL 33314

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: ADAM M SHAPKIN, D.C., P.A.

02/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: SHAPKIN, ADAM M
Address: 8343 SW 5TH ST. 101
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: SHAPKIN, ADAM M
Address: 5239 SW 40TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ADAM M SHAPKIN, D.C., P.A.

PVST

02/21/2004

Electronic Signature of Signing Officer or Director

Date