2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070677

Entity Name: CHIROPRACTIC OVERSIGHT, INC.

FILED Apr 14, 2008 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
5440 MARINER STREET SUITE 112					
TAMPA, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	NER STREET				
SUITE 112 TAMPA, FI					
FEI Number:	20-1067866	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
5440 MARI SUITE 112	AN, JOHN CF INER STREET . 33609 US	0			
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electroni	c Signature of Registered Ag	ent	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ARAUJO, RONÁ	STREET, SUITE 112	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NICOLE MIDILI CTLR 04/14/2008