## **2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000024693

Entity Name: BACK 2 HEALTH MEDICAL CENTER, INC.

**Current Principal Place of Business:** 

3524 NORTH POWERLINE ROAD POMPANO BEACH, FL 33069

## **Current Mailing Address:**

3524 NORTH POWERLINE ROAD POMPANO BEACH. FL 33069 US

FEI Number: 26-4672722 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

OHEARN, JAMES J 2466 NE 17TH COURT JENSEN BEACH, FL 34957 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

FILED Apr 25, 2013

**Secretary of State** 

CC6551766959

## Officer/Director Detail:

Title F

Name KIRSCHNER, RONALD D.C.
Address 2310 N.W. 95TH TERRACE
City-State-Zip: CORAL SPRINGS FL 33065

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: RONALD KIRSCHNER

**PRESIDENT** 

04/25/2013

Electronic Signature of Signing Officer/Director Detail

Date