2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2016
Secretary of State
CC8153009766

DOCUMENT# P10000090113

Entity Name: WEST PALM BEACH CHIROPRACTIC, P.A.

Current Principal Place of Business:

3111 45TH ST.
SUITE 5
WEST PALM BEACH, FL 33407

Current Mailing Address:

3111 45TH ST.
SUITE 5
WEST PALM BEACH, FL 33407 US

FEI Number: 27-3885537

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHIFFMAN, PAUL
3111 45TH ST.
SUITE 5
WEST PALM BEACH, FL 33407 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	P
Name	SCHIFFMAN, PAUL
Address	3111 45TH ST. SUITE 5
City-State-Zip:	WEST PALM BEACH FL 33407

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: PAUL SCHIFFMAN PRES 02/15/2016

Electronic Signature of Signing Officer/Director Detail — Date