

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000067856

Entity Name: CHIRO CHOICE SOUTH P.A.

Current Principal Place of Business:

1601-1 N MAIN ST #3159
JACKSONVILLE, FL 32206

Current Mailing Address:

1601-1 N MAIN ST #3159
JACKSONVILLE, FL 32206 US

FEI Number: 87-2081474

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEGALCORP SOLUTIONS, LLC
3440 W HOLLYWOOD BLVD. SUITE 415
HOLLYWOOD, FL 33021 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 CAMMARANO, DANIEL
Address 1601-1 N MAIN ST #3159
City-State-Zip: JACKSONVILLE FL 32206

Title SEC
Name CAMMARANO, COREEN
Address 1601-1 N MAIN ST #3159
City-State-Zip: JACKSONVILLE FL 32206

Title DIR
Name CAMMARANO, DANIEL
Address 1601-1 N MAIN ST #3159
City-State-Zip: JACKSONVILLE FL 32206

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: DANIEL CAMMARANO

OWNER

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date