FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

| | 1998 | ORI | | Secreta DIVISION Of | ary of State CORPORA | TIONS | Secretary | 01.2 | iaie |
|---|---|---|---|---|--|---|---|---|---|
| DOCUI 1. Corporation ROSEW | | # J498 IROPRACTIC C | | (8) | | | | D) 61611 21611 6141 | |
| Principal Place | e of Busines: | s | Mailir | ng Address | | | | HI CICH OLDK OLD | |
| 320 W FLETCH TAMPA FL 33 US | HER AVE #10 | | 320 1 | 320 W FLETCHER AVE #105 TAMPA FL 33612 US | | | DO NOT WRITE IN THIS | S SPACE | |
| | | | | | | | 3. Date Incorporated or Qualified 12/22/1986 | | |
| 2. Principal Pl | lace of Busin | ness | 2a. M | ailing Address | | | 4. FEI Number | Ap | ptied For |
| 21 | | | 26 | | | | 59-2885809 | | t Applicable |
| Suite, Apt. | #. etc. | | ⊢¬ | Suite, Apt #, etc. | | | 5. Certificate of Status Desired | \$8.75 / Fee Re | |
| City & State | 9 | | 27 C | ty & State | | | 6. Election Campaign Financing | \$5.00 | |
| 23 | | | 28 | , - | | | Trust Fund Contribution | Added t | |
| Zip | | Country | Zi | Р | Coun | try | 8. This corporation owes or has paid the c | urrent year Int | angible |
| 24 | | 25 | 29 | | 30 | | Personal Property Tax due June 30. | |] No |
| | | and Address of Co | urrent Hegisteri | eo Agent | | Name | 10. Name and Address of New Registered | a Agent | |
| | LUNGER, S | HERYL A HER AVE #105 | | | | | | | |
| | MPA FL 336 | | | | 1 | Street Ac | ddress (P.O. Box Number is Not Acceptable) | | l |
| 174 | M A 1 E 041 | V12 | | | Ē | 13 | | | |
| | | | | | | 14 City | | 85 Zip (| Code |
| | | | | |] | | _F l | ᆸᆝᆝ | |
| 44 Purcuant I | to the provisi | ions of Sections 607 | 7.0502 and 607. | 1508, Florida Statu | tes, the abo | ove-named c | orporation submits this statement for the purpose | of changing it | s registered |
| office or re | egistered ag | ent, or both in the S | State of Florida. | Such change was | authorized | by the corpo | ration's board of directors. I hereby accept the ar | ppointment as | registered |
| office or re agent. I as | ogistered ag m familiar wi | erit, or both, in the S the accept he c | State of Florida. obligations of, Se | Such change was ection 607.0505, Fl | authorized Iorida Statu | by the corpo tes. | orporation submits this statement for the purpose reation's board of directors. I hereby accept the ap | opointment as | registered |
| SIGNATURE | ς | <i>-</i> >>(| State of Florida. obligations of, Si | _ | | | 3/2/ | pointment as | registered |
| SIGNATURE. | ogistered ag m familiar wi Signature type | did name (egiste | State of Florida. obligations of, Si applications SAND DIRECTO | elemnie (NO | | | oration's board of directors. I hereby accept the appared when reinstaling) ADDITIONS/CHANGES TO OFFICERS AN | 1/70 | |
| SIGNATURE | Signature type | OF CER. | | elemnie (NO | E Registered | \gont signature re | quired when reinstating) DATE | 1/70 | |
| SIGNATURE | Signature, types P BALLING | OF CER. OF CER. OF CER. | S AND DIRECTO | Honole (NO | E Registered / | \gont signature re | quired when reinstating) DATE | VD DIRECTOR | S IN 12 |
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1. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, con an attagrammat with an address.

FILED

Mar 30 1998 8:00am