

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011573

FILED
Jan 16, 2006
Secretary of State

Entity Name: MOBILE CHIROPRACTIC FRANCHISE DEVELOPMENT, LLC

Current Principal Place of Business:

13865 SOUTH DIXIE HWY #307
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

13865 SOUTH DIXIE HWY #307
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0170689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, JEFF
8284 SW 176 TERRACE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

SOLOMON, JEFF
7315 SW 109TH TERRACE
MIAMI, FL 33156 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:

01/16/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SOLOMON, JEFF
Address: 8284 SW 176 TERRACE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SOLOMON, JEFF
Address: 7315 SW 109TH TERRACE
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEFFREY SOLOMON

DR.

01/16/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date