2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000013563 1. Entity Name
MAURICIO CHIROPRACTIC NORTH LLC



FILED Mar 19, 2007 8:00 am Secretary of State

03-19-2007 90468 001 ***100.00

	e of Business	Mailing Address	•				,	,		
4747 S. CONWAY ROAD, SUITE A ORLANDO, FL 32812			4747 S. CONWAY ROAD, SUITE A ORLANDO, FL 32812			30002702				
2. Principal Pl	ace of Business - No P.O. Bo	ox # 3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		02	242007	Chg-LLC	CR2I	E083 (12/06)	
City & State		City & State	City & State		1	FEI Numb 02-061			<u> </u>	oplied For ot Applicable
Zip	Country	Zip	Country	<i>,</i>	5.	Certificate	of Status Desired		\$5.00 Ad Fee Require	
	6. Name and Address of	Current Registered Agent			7. 1	Name and	Address of New	Registere	d Agent	
ARNOLD, MATHENY & EAGAN, P.A. 801 N. MAGNOLIA AVENUE, SUITE 201 ORLANDO, FL 32802			Name Street Address		ress (P.O. 6	s (P.O. Box Number is Not Acceptable)				
	<i>y</i>		-	City			·	F	Zip Coo	e
	<u> </u>	<u> </u>		•					<u> </u>	
	named entity submits this stations of registered agent.	tement for the purpose of changing	its registered	l office or re	gistered ag	gent, or bo	th, in the State of I	Florida. I a	m familiar with	and accept
SIGNATURE .	Signature, typed or printed name of regi-	stered agent and little if applicable. (I	NOTE: Registered A	gent signature re	required when r	einstating)		DATE	E	
Fi Di	ing Fee is \$50.00 ue by May 1, 2007								payable to tment of Stat	e
9.	MANAGINO		10.				ADDITION	S/CHANG	 E\$	
9. TITLE	MANAGINO MGRM;	G MEMBERS/MANAGERS	10.				ADDITION	S/CHANG	ES Change	☐ Addition
							ADDITION	S/CHANG		Addition
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TITLE NAME STREET ADDRESS	MGRM; MĄŬRICIO, JOSE J 4747 S. CONWAY ROAI	☐ Delete	TITLE NAME STREET CITY-S TITLE	I			ADDITION	S/CHANG		Addition
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11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

Jose J. Mauricio
OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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