2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# L07000121454

Entity Name: MAURICIO CHIROPRACTIC POINCIANA LLC

Current Principal Place of Business:

4747 SOUTH CONWAY ROAD, STE A
ORLANDO, FL 32812

New Principal Place of Business:

860 TOWNE CENTER DRIVE
KISSIMMEE, FL 34759

Current Mailing Address:

4747 SOUTH CONWAY ROAD, STE A
ORLANDO, FL 32812

New Mailing Address:

625 S. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

FEI Number: 26-1554712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AM&E SERVICES LLC
801 N. MAGNOLIA AVENUE, STE 201
ORLANDO, FL 32802 US

Name and Address of New Registered Agent:

AM&E SERVICES LLC
605 E. ROBINSON STREET
730
ORLANDO, FL 32801 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: _____ 04/16/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: MAURICIO, JOSE J
Address: 625 S. RONALD REAGAN BLVD.
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify 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: JOSE J. MAURICIO MRGM 04/16/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date