

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121454

FILED
Mar 24, 2009
Secretary of State

Entity Name: MAURICIO CHIROPRACTIC POINCIANA LLC

Current Principal Place of Business:

860 TOWNE CENTER DRIVE
KISSIMMEE, FL 34759

New Principal Place of Business:

Current Mailing Address:

625 S. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Mailing Address:

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
605 E. ROBINSON STREET
730
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

MGRM

03/24/2009

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