

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000112687

FILED
May 01, 2012
Secretary of State

Entity Name: K J CHIROPRACTIC CENTER LLC

Current Principal Place of Business:

5233 OLD WINTER GARDEN RD
D
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

3217 FAWNWOOD DR
OCOE, FL 34761

New Mailing Address:

FEI Number: 27-1363197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, SADAT
3217 FAWNWOOD DR
OCOE, FL 34761 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: MGR
Name: SMITH, SADAT
Address: 3217 FAWNWOOD DR
City-St-Zip: OCOE, FL 34761

I hereby 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: SADAT SMITH

DR

05/01/2012

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