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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L53533

CHIROPI	RACTIC DOCTORS ON CA	LL, INC.						
Principal Place	e of Rusiness	Mailing Address			F (MET) (MIT AM) ATTACK STEEL STEEL	12 (1168 111) BIE11 GIE)(2 (8)) (2)2) (4)4)	
P O BOX 1325 P O BOX 1325 NEW PORT RICHEY FL 34656 US US		r FL 34656		DO NOT W 3. Date Incorporated or Qualif 02/26/1990	VRITE IN THIS S	PACE	·:	
		2a. Mailing Addres		<u> </u>	4. FEI Number		Appl	ied For
2. Principal P	Place of Business	26. Waning Address	33		65-0173525		Not.	Applicable
Suite, Apt.	# etc	Suite, Apt. #, 6	etc.	-		. 🗸	\$8.75 Ad	ditional
	· m, oto.		سعت سيست	<u></u>	5. Certificate of Status Desired		Fee Requ	
City & Stat		City & State			6. Election Campaign Financi	ing \square	\$5.00 M	
13		28			Trust Fund Contribution		Added to	Fees
Zip	Country	Zip		untry	8. This corporation owes the		ngible	Ana
24 .	25	29	30		Personal Property Tax.			()No
	9. Name and Address of Curre	ent Registered Agent		94 Nome	10. Name and Address of Ne	w Registered A	Agur	
DD4	MD CTEVEN M	, A		81 Name		<u>,,,</u>		
	AND, STEVEN M 1 RANDAN COURT	J. 145		82 Street Add	ress (P.O. Box Number is Not Acc	eptable)		, I
	N PORT RICHEY FL 34652			83	************************************	Carlos de Santa de Carlos de Santa de S	21 (21) N. A. (21)	4 a a a a a a a a a a a a a a a a a a a
NEY	PORT RICHET PL 34032			83			相談的觀點	
		•		84 City		FL	85 Zip Co	de
10 10 mars 3/99	to the provisions of Sections 607.05	20 19 19 19 19 19 19 19 19 19 19 19 19 19		1			hanging its r	egistered
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE: Register	ed Agent signature require	ad when reinstating)CADDITIONS/CHANGES TO	DATE OFFICERS AND	D DIRECTOR	RS IN 12
TITLE	D ·	☐ DE	LETE 1.1	TITLE .			Change	
NAME	BRAND, STEVEN M		1.2	NAME				
STREET ADDRESS	6031 RANDAN COURT	_	1.3	STREET ADDRESS				Ì
CITY-ST-ZIP	NEW PORT RICHEY FL 3465			CITY-ST-ZIP			Change	Addition
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NAME				NAME				
STREET ADDRESS	s			STREET ADDRESS				
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NAME	周周九 (32年): 23.78 · · · · · · · · · ·	DE	LETE 3.1	TITLE	The state of the s		Change	☐ Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed; or on an attachment with an address, with all paper like empowered.

SIGNATURE: