2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2006
Secretary of State

DOCUMENT# P00000038045

Entity Name: B&D CHIROPRACTIC CENTER, INC.

Current Principal Place of Business:

5450 S. ST. RD. 7, STE. 8
FT. LAUDERDALE, FL 33314

New Principal Place of Business:

815 SE 1ST AVE
HALLANDALE, FL 33009

Current Mailing Address:

5450 S. ST. RD. 7, STE. 8
FT. LAUDERDALE, FL 33314

New Mailing Address:

815 SE 1ST AVE
HALLANDALE, FL 33009

FEI Number: 65-0988350 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DORFMAN, DAVID J
5450 S. ST. RD. 7, STE. 8
FT. LAUDERDALE, FL 33314 US

Name and Address of New Registered Agent:

DORFMAN, DAVID J
815 SE 1ST AVE
HALLANDALE, FL 33009 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: 06/21/2006
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DORFMAN, DAVID J
Address: 511 BAYSHORE DR., #208
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: D ( ) Delete
Name: GREENWALD, BRETT
Address: 8495 SE MANGROVE ST.
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRETT GREENWALD P 06/21/2006
Electronic Signature of Signing Officer or Director — Date