

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000070470

FILED
Apr 27, 2006
Secretary of State

Entity Name: ABACOA TOWN CENTER CHIROPRACTIC, INC.

Current Principal Place of Business:

1155 MAIN STREET
SUITE 105
JUPITER, FL 33458 US

New Principal Place of Business:

500 UNIVERSITY BLVD
SUITE 211
JUPITER, FL 33458 US

Current Mailing Address:

1155 MAIN ST
SUITE 105
JUPITER, FL 33458 US

New Mailing Address:

500 UNIVERSITY BLVD
SUITE 211
JUPITER, FL 33458 US

FEI Number: 65-1027248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JOSHUA K
112 CASA GRANDE COURT
PALM BEACH GARDENS, FL 33418 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, JOSHUA K
Address: 112 CASA GRANDE COURT
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOSHUA SMITH

CEO

04/27/2006

Electronic Signature of Signing Officer or Director

Date