

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079724

Entity Name: IDEAL CHIROPRACTIC, INC.

FILED
Sep 20, 2004
Secretary of State

Current Principal Place of Business:

2828 E. COMMERCIAL BLVD.
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

1511 E COMMERCIAL BLVD PMB 140
FT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-1034239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERTEL, CHARLES L
2060 NE 55TH ST
FORT LAUDERDALE, FL 33308 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

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: PVST () Delete
Name: ERTEL, CHARLES L
Address: 2060 NE 55TH ST
City-St-Zip: FT LAUDERDALE, FL 33308

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 Section 119.07(3)(i), 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: CHARLES L. ERTEL

DC

09/20/2004

Electronic Signature of Signing Officer or Director

Date