

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000082403

FILED
Apr 18, 2003
Secretary of State

Entity Name: ACUPUNCTURE HEALTHCARE PHYSICIANS, INC.

Current Principal Place of Business:

2628 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

New Principal Place of Business:

333 N ORLANDO AVENUE
COCOA BEACH, FL 32931

Current Mailing Address:

2628 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MAMCZUR, NINETTE
2628 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

Name and Address of New Registered Agent:

MAMCZUR, NINETTE A.P.
2628 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

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: NINETT MAMCZUR

04/18/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAMCZUR, NINETTE
Address: 2628 NEWFOUND HARBOR DR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O () Change (X) Addition
Name: MAMCZUR, THOMAS J
Address: 2628 NEWFOUND HARBOR DR.
City-St-Zip: MERRITT ISLAND, FL 32952

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: NINETTE MAMCZUR

D

04/18/2003

Electronic Signature of Signing Officer or Director

Date