

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001925

Entity Name: RIVERA CHIROPRACTIC INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

1378 CORAL WAY  
2ND FLOOR  
MIAMI, FL 33145

## New Principal Place of Business:

26308 WESLEY CHAPEL BLVD  
2ND FLOOR  
LUTZ, FL 33559

## Current Mailing Address:

5300 WINDINGBROOK TRAIL  
WESLEY CHAPEL, FL 33543

## New Mailing Address:

FEI Number: 81-0590093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVERA, ELLIOT M  
5300 WINDINGBROOK TRAIL  
WELY CHAPEL, FL 33543 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: PD ( ) Delete  
Name: RIVERA, ELLIOT M  
Address: 5300 WINDINGBROOK TRAIL  
City-St-Zip: WESLEY CHAPEL, FL 33543

## 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: ELLIOT M RIVERA

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date