

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 APR 19 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000014645

1. Entity Name
KEEGAN ROPER, D.C., P.A.



Principal Place of Business
4821 NE 15 TERRACE
FT LAUDERDALE, FL 33334

Mailing Address
4821 NE 15 TERRACE
FT LAUDERDALE, FL 33334

2. Principal Place of Business

1310 NE 41st St.
Suite, Apt. #, etc.

3. Mailing Address

1310 NE 41st St.
Suite, Apt. #, etc.



03212006 REIN-P CR2E098 (11/05)

City & State

Oakland Park, FL
Zip 33334 Country USA

City & State

Oakland Park, FL
Zip 33334 Country USA

4. FEI Number
57-1151362

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SLATKIN, SHELDON
9900 W SAMPLE ROAD STE400
CORAL SPRINGS, FL 33065

7. Name and Address of New Registered Agent

Name Keegan Roper
Street Address (P.O. Box Number is Not Acceptable)
1310 NE 41st Street
City Oakland Park FL Zip Code 33334

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Sheldon Slatkin (deceased 8/10/05) 3/21/06
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	ROPER, KEEGAN	
STREET ADDRESS	4821 NE 15 TERRACE	
CITY-ST-ZIP	FT LAUDERDALE, FL 33334	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Roper, keegan	
STREET ADDRESS	1310 NE 41 st St	
CITY-ST-ZIP	Oakland Park, FL 33334	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

000074056400
05/05/06--01019--030 **\$300.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/06

Date Daytime Phone #