

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000028017

FILED
Dec 14, 2007
Secretary of State

Entity Name: PROFESSIONAL FOOTBALL CHIROPRACTIC SOCIETY, INC.

Current Principal Place of Business:

1948 NE 123RD STREET
SUITE 107
NORTH MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

1948 NE 123RD STREET
SUITE 107
NORTH MIAMI, FL 33181

New Mailing Address:

13762 W. STATE ROAD 84
#135
DAVIE, FL 33325

FEI Number: 84-1673477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARON, SPENCER
1948 NE 123RD STREET
SUITE 107
NORTH MIAMI, FL 33181 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: SPENCER BARON

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: P () Delete
Name: CONRAD, STACEY
Address: 120 E. CARMEL DR
City-St-Zip: CARMEL, IN 460322633

Title: V () Delete
Name: BARON, SPENCER
Address: 1948 NE 123RD STREET
City-St-Zip: NORTH MIAMI, FL 33181

Title: S () Delete
Name: SOKOLOFF, ALAN
Address: 7951 CRAIN HWYS.
City-St-Zip: GLEN BURNIE, MD 210614934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: SPENCER BARON

V

12/14/2007

Electronic Signature of Signing Officer or Director

Date