2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P06000005390

Entity Name: CHIROMEDIC CENTERS, P.A.

Current Principal Place of Business:

24112 S.W. 107TH AVE
HOMESTEAD, FL 33032

New Principal Place of Business:

7335 SW 170TH TERRACE
PALMETTO BAY, FL 33157

Current Mailing Address:

24112 S.W. 107TH AVE
HOMESTEAD, FL 33032

New Mailing Address:

7335 SW 170TH TERRACE
PALMETTO BAY, FL 33157

FEI Number: 20-4163801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUADAGNO, PAUL L DR.
24112 SW 107TH AVE
HOMESTEAD, FL 33032 US

Name and Address of New Registered Agent:

GUADAGNO, PAUL L DR.
7335 SW 170TH TERRACE
PALMETTO BAY, FL 33157 US

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: 04/30/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GUADAGNO, PAUL L DR.
Address: 24112 SW 107TH AVE
City-St-Zip: HOMESTEAD, FL 33032

Title: VP ( ) Delete
Name: ARAYA, LISETH V
Address: 24112 S.W. 107TH AVE
City-St-Zip: HOMESTEAD, FL 33032

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GUADAGNO, PAUL L DR.
Address: 7335 SW 170TH TERRACE
City-St-Zip: PALMETTO BAY, FL 33157

Title: VP (X) Change ( ) Addition
Name: ARAYA, LISETH V
Address: 7335 SW 170TH TERRACE
City-St-Zip: PALMETTO BAY, FL 33157

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: PAUL L. GUADAGNO P 04/30/2008
Electronic Signature of Signing Officer or Director — Date