

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000007879

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: MONTADAS CHIROPRACTIC CLINIC, INC.

**Current Principal Place of Business:**

15426 N.W. 77TH CT.  
MIAMI LAKES, FL 330165803

**New Principal Place of Business:**

**Current Mailing Address:**

15426 N.W. 77TH CT.  
MIAMI LAKES, FL 330165803

**New Mailing Address:**

FEI Number: 20-4112063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONTADAS, HINDRA  
15426 NW 77TH CT  
MIAMI LAKES, FL 330165803 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: P ( ) Delete  
Name: MONTADAS, EDUARDO A  
Address: 15426 NW 77TH CT  
City-St-Zip: HIALEAH, FL 330165803

Title: VP ( ) Delete  
Name: MONTADAS, HINDRA  
Address: 15426 NW 77TH CT  
City-St-Zip: MIAMI LAKES, FL 330165803

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: EDUARDO A MONTADAS

PRES

03/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date