

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000075735

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** BRUCE MARK CHIROPRACTIC, INC

**Current Principal Place of Business:**

7565 W. OAKLAND PARK BLVD  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

2030 WASHINGTON ST  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

12130 SW 2ND ST  
PLANTATION, FL 33325

**New Mailing Address:**

2030 WASHINGTON ST  
HOLLYWOOD, FL 33020

**FEI Number:** 27-0914901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARK, BRUCE  
12130 SW 2ND ST  
PLANTATION, FL 33325 US

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

MARK, BRUCE  
2030 WASHINGTON ST  
HOLLYWOOD, FL 33020 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:** BRUCE MARK

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MARK, BRUCE  
**Address:** 12130 SW 2ND ST  
**City-St-Zip:** PLANTATION, FL 33325

I hereby 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 all other like empowered.

**SIGNATURE:** BRUCE MARK

PRES

03/16/2011

Electronic Signature of Signing Officer or Director

Date