

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000065152

Entity Name: WESTON CHIROPRACTIC, P.A.

FILED
Feb 08, 2011
Secretary of State

Current Principal Place of Business:

1311 GINGER CIRCLE
WESTON, FL 33326

New Principal Place of Business:

1398 SW 160TH AVE
102
SUNRISE, FL 33326

Current Mailing Address:

1311 GINGER CIRCLE
WESTON, FL 33326

New Mailing Address:

1398 SW 160TH AVE
102
SUNRISE, FL 33326

FEI Number: 27-3202670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, TEIG ESQ.
4770 BISCAYNE BLVD.
SUITE 940
MIAMI, FL 33137 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

OFFICERS AND DIRECTORS:

Title: VP
Name: GOODMAN, STEVEN D
Address: 100 N FEDERAL HWY APT # 524
City-St-Zip: FT LAUDERDALE, FL, FL 33301

Title: P
Name: FISHMAN, DEAN L
Address: 1311 GINGER CIRCLE
City-St-Zip: WESTON, FL 33326

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: DEAN FISHMAN, D.C.

PRES

02/08/2011

Electronic Signature of Signing Officer or Director

Date