

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000038236

Entity Name: LEON CHIROPRACTIC, INC.

FILED  
Jan 06, 2012  
Secretary of State

**Current Principal Place of Business:**

3471 N. FEDERAL HWY  
#402  
OAKLAND PARK, FL 33306

**New Principal Place of Business:**

**Current Mailing Address:**

3471 N. FEDERAL HWY  
#402  
OAKLAND PARK, FL 33306

**New Mailing Address:**

FEI Number: 41-2274717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEON, ERIC J  
3471 N. FEDERAL HWY  
#402  
OAKLAND PARK, FL 33306 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: P  
Name: LEON, ERIC J  
Address: 3471 N. FEDERAL HWY #402  
City-St-Zip: OAKLAND PARK, FL 33306

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: ERIC LEON

PRES

01/06/2012

Electronic Signature of Signing Officer or Director

Date