2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000056506

FILED Apr 16, 2012 Secretary of State

Entity Name: BEST CARE CHIROPRACTIC AND MEDICAL CLINICS OF FLORIDA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1774 SW 8TH ST SUITE A 1774 SW 8TH ST MIAMI, FL 33135 SUITE A

MIAMI, FL 33135

Current Mailing Address: New Mailing Address:

1774 SW 8TH ST SUITE A 1774 SW 8TH ST SUITE A SUITE A MIAMI, FL 33135 SUITE A MIAMI, FL 33135

FEI Number: 45-2601403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DAUGHERTY, CALEB H
1500 S OCEAN DR CONDO 15J
HOLLYWOOD, FL 33019 US
DAUGHERTY, CALEB H
628 SANTANDER AVENUE
APT. #5
CORAL GABLES, FL 33134 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: DR. CALEB H. DAUGHERTY 04/16/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DR

Name: DAUGHERTY, CALEB H

Address: 628 SANTANDER AVENUE, APT. #5
City-St-Zip: CORAL GABLES, FL 33134

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: DR. CALEB H. DAUGHERTY DR. 04/16/2012