FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED
95 MAY -1 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000071713 (9)**

1. Corporate Name
AFFILIATED CHIRO MEDICAL CENTERS, INC.

Principal Place of Business
C/O KTG&S REGISTERED AGENT CORPORATION
1401 BRICKELL AVE SUITE 700
MIAMI FL 33131

Mailing Address
C/O KTG&S REGISTERED AGENT CORPORATION
1401 BRICKELL AVE SUITE 700
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/27/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
22 Suite, Apt. #, etc. — 27 Suite, Apt. #, etc.
23 City & State — 28 City & State
24 — 25 — 29 — 30

4. FEI Number: 65-0530719 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation is eligible for a reduction under Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
KTG&S REGISTERED AGENT CORPORATION
1401 BRICKELL AVE
SUITE 700
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	Name
D/P	Donald Brown, DC 1900 Glades Road, #100 Boca Raton, FL 33431
D/S/T	Robert Tannenbaum, DC 1900 Glades Road, #100 Boca Raton, FL 33431

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS — ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing, if voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of the report and is designated with an asterisk.

SIGNATURE: as President Donald Brown 3/24/95 (305) 799-5773
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

0130707 CP