FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500008226 (9)

U.S.A. CHIROPRACTIC CENTER NORTH, INC.

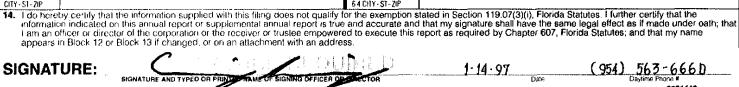
Principal Phase of Purinage Mailing Address					_{ 1 1 1 1 1 1 1 1 1		
Principal Place of Business Mailing Address 2500 N.E. 15TH AVE. 2500 N.E. 15TH AVE.							
	IOR FL 33305	WILTON MANOR FL 333	05-1310				
						3. Date Incorporated or Qualified	
2. Principal Place of Business 28. Mailing Address				·		4. FEI Number Applied For 65-0554133 Not Applicable	
21						60.75	
22]						5. Certificate of Status Desired Fee Required	
City & Sta 23	ate	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	30 Co.	intry	'	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent	
CONTONATION IN CHARACTER INC.					Name		
1201 HAYS ST. TALLAHASSEE FL 32301				82	Street Add	dress (P.O. Box Number is Not Acceptable)	
				83	l		
				84	City	FL 85 Zip Code	
office or	registered agent, or both, in the Stat am familiar with, and accept the obliq	e of Florida Such change wa gations of, Section 607.0505,	s authorize Florida Stal	d by tutes	y the corpora s.	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered uired when reinstating). DATE	
12.		ND DIRECTORS	13.	u Age	ant eignature redu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	P DELETE		1.1 TITLE		Change Addition	
NAME	GUGLIELMO, JERRY		1.2 N	AME		•	
STREET ADDRESS 2500 N.E. 15TH AVE.		1		1.3 STREET ADDRESS			
CITY - ST - ZIP	WILTON MANOR FL 33305	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		ST - 71P	Change Additio	
TITLE NAME	SINGER, CRAIG			2.2 NAME		Change Addino	
STREET ADDRESS	ARAA NIP ARTH AVE				ADDRESS		
CITY-ST-ZIP	WILTON MANOR FL 33305			2. 4 CITY-ST-ZIP			
TITLE	V	☐ DELETE	3.1 ₹	TLE		Change Additio	
NAME	HIRSCHENSON, ALAN		3.2 N	AME			
STREET ADDRESS	2500 N.E. 15TH AVE. WILTON MANOR FL 33305				ADDRESS		
CITY-ST-ZIP	T WILLIAM MANON FE 33305	X DELETE	3.4. (4.1 T	_	ST-ZIP	☐ Change ☐ Additio	
TITLE NAME	LONDON, PETER	A occent	4.11			Change	
STREET ADDRESS	ACAA NEE JETH AND				r address		
CITY - ST - ZIP	WILTON MANOR FL 33305				ST-ZIP		
TITLE				5.1 TITLE		☐ Change ☐ Additio	
NAME			5.2 N	AME			
STREET ADDRESS	5		5.3 S	TREET	ADDRESS		
CHTY-ST-ZIP		T DELETE			ST-ZIP	110000	
TITLE NAME		DELETE	6.1 T 6.2 N		-	Change Addilio	
I NAME			■ 62N	HMI	1		

63 STREET ADDRESS 64 CHY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - S1 - ZIP



1-14-97

(954) 563-666D

FILED

Jan 22 1997 8:00am

Secretary of State

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