

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000089784

FILED
Aug 23, 2004
Secretary of State

Entity Name: EDELSON CHIROPRACTIC CLINIC, INC.

Current Principal Place of Business:

8780 SEMINOLE BLVD.
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

8780 SEMINOLE BLVD.
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-3538325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

M.C. CABELLO
8950 SEMINOLE BLVD.
SUITE 2
SEMINOLE, FL 33772 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: M.C. CABELLO

08/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: EDELSON, STEVEN G
Address: 8780 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

Title: P () Delete
Name: EDELSON, STEVEN G
Address: 8780 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

Title: S () Delete
Name: EDELSON, ELIZABETH
Address: 8780 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVEN G. EDELSON

CEO

08/23/2004

Electronic Signature of Signing Officer or Director

Date