

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000043110

FILED
Oct 10, 2013
Secretary of State

Entity Name: ALEXANDER CHIROPRACTIC INC.

Current Principal Place of Business:

504 NE 5TH AVENUE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

504 NE 5TH AVENUE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 65-0915851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, STEPHEN L
504 NE 5TH AVENUE
DELRAY BEACH, FL 33483 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: STEPHEN ALEXANDER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ALEXANDER, STEPHEN
Address: 504 NE 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

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: STEPHEN ALEXANDER

PD

10/10/2013

Electronic Signature of Signing Officer or Director

Date