

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000053689

FILED
Jan 10, 2005
Secretary of State

Entity Name: DELRAY BACK AND NECK CENTER, INC.

Current Principal Place of Business:

265 NORTHEAST 2ND AVENUE
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

265 NE 2ND AVE
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 65-0927157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BADER, STEVEN
265 NORTHEAST 2ND AVENUE
DELRAY BEACH, FL 33444 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BADER, STEVEN
Address: 265 NORTHEAST 2ND AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 BADER

PSTD

01/10/2005

Electronic Signature of Signing Officer or Director

Date