DOCUMENT # P99000061295 1. Entity Name RICHARD J. POMELLA D.C.,P.A. Principal Place of Business Mailing Address 7045 WEST BROWARD BLVD 7045 WEST BROWARD BLVD PLANTATION, FL 33317 PLANTATION, FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. O30820 City & State Zip Country Zip Country Zip Country	May 02, 2006 8:00 am Secretary of State 05-02-2006 90423 001 ***150.00
RICHARD J. POMELLA D.C.,P.A. Principal Place of Business Mailing Address 7045 WEST BROWARD BLVD 7045 WEST BROWARD BLVD PLANTATION, FL 33317 PLANTATION, FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 030820 City & State City & State Zip Country 6. Name and Address of Current Registered Agent 7. Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box N 343 ALMERIA AVENUE Street Address (P.O. Box N CORAL GABLES, FL 33134 City	
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SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of the obligations of registered agent. SIGNATURE	and Address of New Registered Agent
 The above named entity submits this statement for the purpose of changing its registered office or registered agent, of the obligations of registered agent. SIGNATURE	umber is Not Acceptable)
the obligations of registered agent.	FL Zip Code
FILE NOWIN FEE IS \$150.00 9. Election Campaign Financing \$5.00 May B After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees	
10. OFFICERS AND DIRECTORS 11. ADDITION TITLE PSTD Defete TITLE NAME POMELLA, RICHARD J NAME STREET ADDRESS 2850 NE 35 STREET STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33306 CITY-ST-ZIP	DNS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE Delete TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	Change Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapte indicated on this report or supplemental eport is true and accurate and that my signature shall have the same legal of the corporation or the receiver or trustee empoyered to execute this report of required by Chapter 607, Florida S changed, or on an attachment with an address, with all other like empowered	
SIGNATURE:	r 119, Florida Statutes. I further certify that the information effect as if made under oath; that I am an officer or director atutes; and that my name appears in Block 10 or Block 11 if