

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V03306

**FILED
Oct 21, 2004
Secretary of State**

Entity Name: AUGUST CHIROPRACTIC, INC.

Current Principal Place of Business:

12603 NE 7TH AVE
N MIAMI, FL 33161 US

New Principal Place of Business:

695 NE 126TH STREET
N MIAMI, FL 33161 US

Current Mailing Address:

12603 NE 7TH AVE.
N MIAMI, FL 33161 US

New Mailing Address:

695 NE 126TH STREET
N MIAMI, FL 33161 US

FEI Number: 65-0316801 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AUGUST, CRAIG B
12603 NE 7TH AE
N MIAMI, FL 33161 US

Name and Address of New Registered Agent:

AUGUST, CRAIG B
695 NE 126TH STREET
N MIAMI, FL 33161 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: CRAIG B. AUGUST 10/21/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AUGUST, CRAIG B D.C.
Address: 12603 NE 7TH AVE
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AUGUST, CRAIG B D.C.
Address: 695 NE 126TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

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: CRAIG B. AUGUST PRES 10/21/2004

Electronic Signature of Signing Officer or Director Date