2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2015
Secretary of State
CC1743838866

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Entity Name: CAMERON CHIROPRACTIC AND HOLISTIC HEALTHCARE, INC.

Current Principal Place of Business:

C/O COREY CAMERON
2117 NE 44 ST
FT. LAUDERDALE, FL 33308

Current Mailing Address:

C/O COREY CAMERON
2117 NE 44 ST
FT. LAUDERDALE, FL 33308

FEI Number: 65-0115790

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMERON,COREY
2117 NE 44 STREET
FT. LAUDERDALE, FL 33308 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DR
Name	CAMERON, COREY
Address	2117 NE 44 STREET
City-State-Zip:	FT. LAUDERDALE FL 33308

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: DR. COREY CAMERON PRESIDENT 03/19/2015

Electronic Signature of Signing Officer/Director Detail — Date