

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K97771

**FILED
Mar 14, 2017
Secretary of State
CC2361495446**

Entity Name: CENTER FOR MANUAL MEDICINE, INC.

Current Principal Place of Business:

2067 NE 120TH ROAD
NORTH MIAMI, FL 33181

Current Mailing Address:

2067 NE 120TH ROAD
NORTH MIAMI, FL 33181 US

FEI Number: 65-0138576

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANNI, SILVIA
2067 NE 120TH ROAD
NORTH MIAMI, FL 33181 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 PV
Name VANNI, SILVIA
Address 2067 NE 120TH ROAD
City-State-Zip: NORTH MIAMI FL 33181

Title ST
Name VANNI, STEVEN
Address 2067 NE 120TH ROAD
City-State-Zip: NORTH MIAMI FL 33181

Title D
Name VANNI, SILVIA
Address 2067 NE 120TH ROAD
City-State-Zip: NORTH MIAMI FL 33181

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: SILVIA VANNI

DIRECTOR

03/14/2017

Electronic Signature of Signing Officer/Director Detail

Date