2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State
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Entity Name: SCOMA CHIROPRACTIC, P.A.

Current Principal Place of Business:

3714 DEL PRADO BLVD
STE C
CAPE CORAL, FL 33904-7141

Current Mailing Address:

3714 DEL PRADO BLVD
STE C
CAPE CORAL, FL 33904-7141

FEI Number: 65-0159053

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCOMA, LOUIS DR
3714-C DEL PRADO BLVD.
STE C
CAPE CORAL, FL 33904 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	SCOMA, LOUIS
Address	3714-C DEL PRADO BLVD.
City-State-Zip:	CAPE CORAL FL 33904

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 LOUIS SCOMA PRESIDENT 01/08/2017

Electronic Signature of Signing Officer/Director Detail — Date