

**2021 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000078707

**Entity Name:** WEST SIDE CHIROPRACTOR, INC.

**Current Principal Place of Business:**

2550 WEST COLONIAL DRIVE  
SUITE 408 A  
ORLANDO, FL 32804

**Current Mailing Address:**

2550 WEST COLONIAL DRIVE  
SUITE 408 A  
ORLANDO, FL 32804 US

**FEI Number:** 32-0086348

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RENE, SMITH  
356 SOUTH HART BLVD  
ORLANDO, FL 32835 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:** RENE SMITH

06/22/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SMITH, RENE L  
Address        356 SOUTH HART BLVD  
City-State-Zip: ORLANDO FL 32835

*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:** RENE SMITH

P

06/22/2021

Electronic Signature of Signing Officer/Director Detail

Date