

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000066215

Entity Name: MONA ISSA CHIROPRACTIC AND HOLISTIC CENTER P.A.

Current Principal Place of Business:

1000 LINCOLN ROAD #240
MIAMI BEACH, FL 33139

Current Mailing Address:

11200 PINES BLVD.
SUITE#101
PEMBROKE PINES, FL 33026

FEI Number: 20-2816554

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ISSA, MONA
11200 PINES BLVD. SUITE 101
PEMBROKE PINES, FL 33026 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 ISSA, MONA J
Address 11200 PINES BLVD. SUITE 101
City-State-Zip: PEMBROKE PINES FL 33026

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: MONA ISSA

DR./OWNER

03/10/2014

Electronic Signature of Signing Officer/Director Detail

Date