

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000052877

Entity Name: BEACH CHIROPRACTIC, INC.

Current Principal Place of Business:

3000 N. ATLANTIC AVE.
STE 105
COCOA BEACH, FL 32931

Current Mailing Address:

3000 N. ATLANTIC AVE.
STE 105
COCOA BEACH, FL 32931

FEI Number: 83-0899523

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEACH CHIROPRACTIC
205 N. 2ND STREET
#103
COCOA BEACH, FL 32931 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: CHRISTA ROBBEN

03/03/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ROBBEN, CHRISTA A
Address 205 N. 2ND STREET #103
City-State-Zip: COCOA BEACH FL 32931

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: CHRISTA ROBBEN

OWNER

03/03/2025

Electronic Signature of Signing Officer/Director Detail

Date