

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000033544

Entity Name: CORAL REEF CHIROPRACTIC CENTER, P.A.

Current Principal Place of Business:

9044 SW 152 ST
MIAMI, FL 33157

Current Mailing Address:

9044 SW 152 ST
MIAMI, FL 33157

FEI Number: 65-0581312

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEPIN, MARK S
9044 SW 152ND ST
MIAMI, FL 33157 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 D
Name PEPIN, MARK
Address 9044 SW 152 ST
City-State-Zip: MIAMI FL 33157

Title O
Name PEPIN, MELISSA
Address 9044 SW 152 STREET
City-State-Zip: MIAMI FL 33157

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: MARK PEPIN

DIRECTOR

02/09/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date