

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000097838

**Entity Name:** BRICKELL CHIROPRACTIC CENTER, INC.

**Current Principal Place of Business:**

5975 N. FEDERAL HIGHWAY #121  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

5975 N. FEDERAL HIGHWAY #121  
FORT LAUDERDALE, FL 33308

**FEI Number:** 65-0881221

**Certificate of Status Desired:** No

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

KEITH, BRICKELL S DR.  
5975 N. FEDERAL HIGHWAY #121  
FORT LAUDERDALE, FL 33308 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:** DR KEITH S BRICKELL

01/25/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DR  
Name BRICKELL, KEITH S DR.  
Address 5975 N FEDERAL HWY #121  
City-State-Zip: FT LAUDERDALE FL 33308

*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 KEITH BRICKELL

OWNER

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date