

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000078296

Entity Name: FRIEDMAN CHIROPRACTIC CENTER, PA

Current Principal Place of Business:

8700 WEST FLAGLER STREET
260
MIAMI, FL 33174

Current Mailing Address:

87000 WEST FLAGLER STREET
260
MIAMI, FL 33174 US

FEI Number: 65-0947981

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FREEDMAN, DAVID HESQ.
11900 BISCAYNE BLVD.
SUITE 616
NORTH MIAMI, FL 33181 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 FRIEDMAN, GARRY DR.
Address 8700 WEST FLAGLER STREET
260
City-State-Zip: MIAMI FL 33174

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: GARRY FRIEDMAN

DR

02/17/2016

Electronic Signature of Signing Officer/Director Detail

Date