

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000046500

**Entity Name:** SERENA SARA CHIROPRACTIC CENTER, PLLC

**Current Principal Place of Business:**

10531 SOUTH DIXIE HIGHWAY  
MIAMI, FL 33156

**Current Mailing Address:**

13301 SW 83 AVENUE  
MIAMI, FL 33156

**FEI Number:** 26-2649946

**Certificate of Status Desired:** Yes

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

SARA, SERENA E  
10531 SOUTH DIXIE HIGHWAY  
MIAMI, FL 33156 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SARA, SERENA E  
Address 13301 SW 83 AVENUE  
City-State-Zip: MIAMI FL 33156

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SERENA SARA

MGRM

01/12/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date