

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215537922				
1.) CORPORATION NAME: QUALITY CHIROPRACTIC AND REHAB, INC.		DUE DATE: 10/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DR CAMILLE D'AMATO 1440 ROSEWOOD HILL DR VIENNA, VA		SCC ID NO: 06847438				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY		5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,500
CLASS	AUTHORIZED					
COMMON	1,500					
4.) STATE OR COUNTRY OF INCORPORATION: VA						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 102 ELDEN ST STE 12 CITY/ST/ZIP: HERNDON, VA 20170						
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME: CAMILLE T D'AMATO TITLE: PRES/DIR ADDRESS: 1440 ROSEWOOD HILL DR CITY/ST/ZIP/CO: VIENNA, VA 22182		<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ CAMILLE T D'AMATO	CAMILLE T D'AMATO, PRES/DIR	10/17/2015				
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE				
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.						