

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085425

Entity Name: DOCTOR RESOURCES, INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

1175 SOUTH US HWY 1
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

1175 SOUTH US HWY 1
VERO BEACH, FL 32962

New Mailing Address:

FEI Number: 65-1042395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLODIG, GREGORY J ESQ
GREENSPOON MARDER HIRSCHFELD ET AL.
100 WEST CYPRESS CREEK ROAD SUITE 700
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: JANKE, WALTER
Address: 1175 US HWY 1
City-St-Zip: VERO BEACH, FL 32962

Title: COO () Delete
Name: JANKE, LALITA
Address: 1175 5 US HWY 1
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WALTER JANKE

DCEO

04/23/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date