

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000060106

Entity Name: THE DRILL DOCTOR, INC.

FILED  
Apr 30, 2004  
Secretary of State

**Current Principal Place of Business:**

633 N KROME AVE  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

550 BILTMORE WAY  
SUITE 780  
CORAL GALBES, FL 33134

**Current Mailing Address:**

633 N KROME AVE  
HOMESTEAD, FL 33030

**New Mailing Address:**

550 BILTMORE WAY  
SUITE 780  
CORAL GABLES, FL 33134

FEI Number: 65-0785442

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOCKMAN, PETER M  
550 B. HMORE WAY SUITE 780  
MIAMI, FL 33134

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

HOCKMAN, PETER M  
550 BILTMORE WAY  
SUITE 780  
CORAL GALBES, FL 33134

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

04/30/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: HOCKMAN, JAN  
Address: 151 GOLDEN BEACH DR  
City-St-Zip: GOLDEN BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HOCKMAN, JAN  
Address: 550 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAN HOCKMAN

Electronic Signature of Signing Officer or Director

DP

04/30/2004

Date