

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000106994

**Entity Name:** DOCTOR FURNACE, INC.

**Current Principal Place of Business:**

1111 N. WESTSHORE BLVD  
SUITE 105A  
TAMPA, FL 33607

**Current Mailing Address:**

1111 N. WESTSHORE BLVD  
SUITE 105A  
TAMPA, FL 33607 US

**FEI Number:** 20-0138216

**Certificate of Status Desired:** No

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

KARIM, ADEEL  
1111 N. WESTSHORE BLVD  
SUITE 105A  
TAMPA, FL 33607 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:** ADEEL KARIM

**04/29/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name KARIM, ADEEL  
Address 1111 N. WESTSHORE BLVD  
SUITE 105A  
City-State-Zip: TAMPA FL 33607

*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:** ADEEL KARIM

**PRESIDENT**

**04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date