2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004
Secretary of State

DOCUMENT# G25322

Entity Name: THE DOOR DOCTOR OF SOUTH FLORIDA INC.

Current Principal Place of Business:

% MICHAEL CHICHELLI
1188 NE 47TH ST., OAKLAND PK.
FT. LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

% MICHAEL CHICHELLI
1188 NE 47TH ST., OAKLAND PK.
FT. LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 59-2266033 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHICHELLI, MICHAEL
1188 NE 47TH ST., OAKLAND PK.
FT. LAUDERDALE, FL 33334 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: V ( ) Delete
Name: RANDAZZO, SALVATORE,
Address: 23195 SW 61 AVE
City-St-Zip: BOCA RATON, FL 33428

Title: VST ( ) Delete
Name: RANDAZZO, SALVATORE
Address: 23195 SW 61ST AVE
City-St-Zip: BOCA RATON, FL 33428

Title: P ( ) Delete
Name: CHICHELLI, MICHAEL
Address: 1719 NE 58 ST.
City-St-Zip: FT. LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MICHAEL CHICHELLI MR 07/23/2004
Electronic Signature of Signing Officer or Director — Date