

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J76450

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: Z-DOC'S SALES AND SERVICE, INC.

**Current Principal Place of Business:**

913 E. FLETCHER AVENUE  
TAMPA, FL 33612 US

**New Principal Place of Business:**

**Current Mailing Address:**

1220 W. FLETCHER AVENUE  
TAMPA, FL 33612 US

**New Mailing Address:**

FEI Number: 59-2953546

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BACHMAN, KAREN COPE  
1220 W. FLETCHER AVENUE  
TAMPA, FL 33612 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: PD ( ) Delete  
Name: BACHMAN, BRENT F  
Address: 1220 W. FLETCHER AVENUE  
City-St-Zip: TAMPA, FL 33612

Title: VPD ( ) Delete  
Name: BACHMAN, KAREN COPE  
Address: 1220 W. FLETCHER AVENUE  
City-St-Zip: TAMPA, FL 33612

**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: KAREN COPE BACHMAN

VPD

01/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date