

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L64266

(4)

1. Corporation Name

TICKET DOCTOR, INC.

Principal Place of Business

400 S.E. 12TH ST.
BUILDING A
FORT LAUDERDALE FL 33316

Mailing Address

400 S.E. 12TH ST.
BUILDING A
FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/11/1990

3a. Date of Last Report

06/13/1994

4. FEI Number

65-0337934

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under C. 190.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 107 S.E. 10th ST.

Suite, Apt. #, etc.

22

City & State

23 FT LDLE FL.

Zip

24 33316

Country

25 USA

2a. Mailing Address

26 107 S.E. 10th ST

Suite, Apt. #, etc.

27

City & State

28 FT LDLE FL.

Zip

29 33316

Country

30 USA

9. Name and Address of Current Registered Agent

LEYDIG, RICHARD A., JR.
400 S.E. 12TH ST.
BUILDING A
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number Not Acceptable)

83 107 S.E. 10th STREET

84 City

85 FT LDLE

FL

86 Zip Code

87 33316

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of person or printed name of registered agent and the if approved)

(If the Registered Agent's signature is required when recording)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

15. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

16. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

17. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

18. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

19. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

20. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

21. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

SIGNATURE: RICHARD A. LEYDIG, JR.

(Signature and typed or printed name of signing officer or director)

DATE

4/20/95 305-523
2220