

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L83044

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: THE PRESS DOCTOR, INC.

Current Principal Place of Business:

1010 A N 20TH AVE
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

1010 A N 20TH AVE
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 65-0209485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARD WOLICK
4897 NW 26 AVE.
FT. LAUDERDALE, FL 33020

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOLICK, EDWARD J., JR.
Address: 4897 SW 26 AVENUE
City-St-Zip: FT LAUDERDALE, FL 33311

Title: S (X) Delete
Name: BAUMANN, TERINA
Address: 4897 SW 26TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33312

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 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: EDWARD WOLICK

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date