

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000035942

**FILED**  
**Oct 06, 2006**  
**Secretary of State**

**Entity Name:** FLORIDA'S TUB DCOTOR, INCORPORATED

**Current Principal Place of Business:**

13401 OLDE MEADOWBROOK CIR.  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

23401 OLDE MEADOWBROOK CIR.  
BONITA SPRINGS, FL 34134 US

**Current Mailing Address:**

13401 OLDE MEADOWBROOK CIR.  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

23401 OLDE MEADOWBROOK CIR.  
BONITA SPRINGS, FL 34134 US

**FEI Number:** 30-0072064

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YUDENFRIEND, FRED  
23401 OLDE MEADOWBROOK CIR.  
BONITA SPRINGS, FL 34134 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:** FRED YUDENFRIEND

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: YUDENFRIEND, FRED  
Address: 23401 OLDE MEADOWBROOK CIR.  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S ( ) Delete  
Name: YUDENFRIEND, DIANE  
Address: 23401 OLDE MEADOWBROOK CIR.  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: V ( ) Delete  
Name: YUDENFRIEND, LEE  
Address: 5545 WISHING STAR LANE  
City-St-Zip: GREEN ACRES, FL 33463

**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 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:** FRED YUDENFRIEND

Electronic Signature of Signing Officer or Director

PRES

10/06/2006

Date