## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000076734

City-St-Zip:

SUNRISE, FL 33326

FILED Jul 14, 2005 Secretary of State

Entity Nar	ne: PRES	S DOCTOR ENT	TERPRISES, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
1928 TIGE #12 DANIA, FL	RTAIL BLV 33004	D						
Current Mailing Address:				New Mailing Address:				
1928 TIGE #12 DANIA, FL	RTAIL BLV 33004	D						
FEI Number:	14-1838091	FEI Number	Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desir	ed ( )	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
BAUMANN, TERINA L 1010A N 20TH AVE HOLLYWOOD, FL 33020 US				4897 SW 2	BAUMANN, TERINA L 4897 SW 26TH AVE DANIA, FL 33312 US			
The above in the State	named ent of Florida.	ity submits this s	statement for the pu	rpose of changing i	ts registered	office or registered agent	, or both,	
SIGNATURE:					07/14/2005			
	Elect	ronic Signature	of Registered Agen	t		Date		
Election Car	npaign Finan	cing Trust Fund Co	ontribution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DPST BAUMANN, 4897 SW 2 DANIA, FL	6TH AVE		Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	VP DIRIENZIO, 11854 SW ! DAVIE, FL	9TH CT		Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address:	T YANKELEV 662 WOOD	() Delete ICH, MIKHAIL GATE LN		Title: Name: Address:	T ( WOLLICK, EI 5231 SW 30T			

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.

City-St-Zip:

DANIA, FL 33312

SIGNATURE: EDWARD WOLLICK III 07/14/2005 Τ