## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000080967

Entity Name: DRIVER'S LICENSE DOCTOR, INC.

FILED Apr 30, 2005 Secretary of State

lew Principal Place of Business:

300 SW 2ND STREET, SUITE 10 FORT LAUDERDALE, FL 33312

**Current Mailing Address: New Mailing Address:** 

300 SW 2ND STREET, SUITE 10 FORT LAUDERDALE, FL 33312

FEI Number: 20-0195121 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LAW OFFICES OF LAWRENCE E. BLACKE, P.A. 3326 NE 33RD STREET FORT LAUDERDALE, FL 33308 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

WILLIAMS, SUSANN D WILLIAMS, SUSAN D Name: Name:

C/O 300 SW 2ND STREET, SUITE 10 C/O 300 SW 2ND STREET, SUITE 10 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VD Title: () Delete () Change () Addition

Name: PICCOLO, ROBERT F Name: C/O 300 SW 2ND STREET, SUITE 10 Address: Address: FORT LAUDERDALE, FL 33312 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition STD STD

PICCOLO, RENEE Name: PICCOLO, JOYCE R Name:

C/O 300 SW 2ND STREET, SUITE 10 C/O 300 SW 2ND STREET, SUITE 10 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

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: SUSAN D. WILLIAMS PD 04/30/2005