

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071853

Entity Name: DOCTORSFORHEALTH.COM, INC.

FILED  
Apr 15, 2005  
Secretary of State

## Current Principal Place of Business:

7200 W COMMERCIAL BLVD  
LAUDERHILL, FL 33319

## New Principal Place of Business:

## Current Mailing Address:

7200 W COMMERCIAL BLVD  
LAUDERHILL, FL 33319

## New Mailing Address:

FEI Number: 20-1141227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLAVIN, HERBERT R  
7200 W COMMERCIAL BLVD  
LAUDERHILL, FL 33319 US

## Name and Address of New Registered Agent:

SLAVIN, HERBERT R  
7200 W COMMERCIAL BLVD  
SUITE 210  
LAUDERHILL, FL 33319 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:

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SLAVIN, HERBERT R  
Address: 7200 W COMMERCIAL BLVD  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: CIMORELLI, JANET  
Address: 3384 NW 23RD COURT  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: FLEISCH, STEVEN  
Address: 7200 W COMMERCIAL BLVD  
City-St-Zip: LAUDERHILL, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SLAVIN, HERBERT R MD  
Address: 7200 W COMMERCIAL BLVD  
City-St-Zip: LAUDERHILL, FL 33319

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: HERBERT R. SLAVIN

DIR

04/15/2005

Electronic Signature of Signing Officer or Director

Date