2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 18, 2006
Secretary of State

DOCUMENT# P04000155992

Entity Name: DOCTOR T. INCORPORATED

Current Principal Place of Business:

1045 8TH STREET APT 8
MIAMI BEACH, FL 33139

New Principal Place of Business:

4726 WEST WALLACE AVE
TAMPA, FL 33611 US

Current Mailing Address:

1045 8TH STREET APT 8
MIAMI BEACH, FL 33139

New Mailing Address:

4726 WEST WALLACE AVE
TAMPA, FL 33611 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TIRPAK, AMY M
1045 8TH STREET APT 8
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

TIRPAK, AMY M DR
4726 WEST WALLACE AVE
TAMPA, FL 33611 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: DR AMY M TIRPAK 07/18/2006
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: D ( ) Delete
Name: TIRPAK, AMY M
Address: 1045 8TH STREET APT 8
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete
Name: MYERS, CHRISTINE A
Address: 1045 8TH STREET APT 8
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: TIRPAK, AMY M DR
Address: 4726 WEST WALLACE AVENUE
City-St-Zip: TAMPA, FL 33611

Title: D (X) Change ( ) Addition
Name: MYERS, CHRISTINE A
Address: 4726 WEST WALLACE AVENUE
City-St-Zip: TAMPA, FL 33611

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: DR. AMY M TIRPAK D 07/18/2006
Electronic Signature of Signing Officer or Director Date