

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000093540

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** SO YOU'RE A DOCTOR NOW WHAT, INC.

**Current Principal Place of Business:**

964 WESTWINDS BLVD.  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

2536 PRETZEL LANE  
NORTH PORT, FL 34286

**Current Mailing Address:**

964 WESTWINDS BLVD.  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

2536 PRETZEL LANE  
NORTH PORT, FL 34286

**FEI Number:** 26-0784184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKS, MICHAEL  
964 WESTWINDS BLVD.  
TARPON SPRINGS, FL 34689 US

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

FRANKS, MICHAEL A  
2536 PRETZEL LANE  
NORTH PORT, FL 34286 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: MICHAEL FRANKS

03/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR.  
Name: FRANKS, MIHCHAE A MR.  
Address: 2536 PRETZEL LANE  
City-St-Zip: NORTH PORT, FL 34286

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL A FRANKS

MR

03/19/2012

Electronic Signature of Signing Officer or Director

Date