

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000041995 (0)

1. Corporation Name

THE MONEY DOCTOR, INC.



Principal Place of Business

3111 STIRLING RD.  
SUITE C-301  
FT. LAUDERDALE FL 33312

Mailing Address

3111 STIRLING RD.  
SUITE C-301  
FT. LAUDERDALE FL 33312

3. Date Incorporated or Qualified  
06/15/1993

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 3854 Sheridan Street

26 3854 Sheridan Street

4. FEI Number  
65-0418316

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 Hollywood, FL

28 Hollywood, FL

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip Country

Zip Country

24 33021

25 Broward

29 33021

30 Broward

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOROWITZ, ANDREW A  
31111 STIRLING RD - #301  
FT LAUDERDALE FL 33312

81 Name Andrew A. Horowitz  
82 Street Address (P.O. Box Number is Not Acceptable)  
3854 Sheridan Street  
83  
84 City Hollywood FL 85 Zip Code 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Andrew A. Horowitz, Pres. 4/29/96

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PVST ☐ DELETE  
NAME HOROWITZ, ANDREW  
STREET ADDRESS 3111 STIRLING RD., SUITE 301-C  
CITY-ST-ZIP FT. LAUDERDALE FL 33312

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME Horowitz, Andrew  
1.3 STREET ADDRESS 3854 Sheridan Street  
1.4 CITY-ST-ZIP Hollywood, FL 33021

TITLE D ☐ DELETE  
NAME HOROWITZ, ANDREW  
STREET ADDRESS 3111 STIRLING RD., SUITE 301-C  
CITY-ST-ZIP FT. LAUDERDALE FL 33062

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 954-964-8286

Date

Daytime Phone #

CR2E034 (12/95)