

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004894

Entity Name: AIR DOCTOR, INC.

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

8302 NW 73RD TERRACE  
TAMARAC, FL 33321

## New Principal Place of Business:

## Current Mailing Address:

8302 NW 73RD TERRACE  
TAMARAC, FL 33321

## New Mailing Address:

FEI Number: 65-0855047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DORAN, DARREN  
6138 NW 19TH ST  
MARGATE, FL 33063 US

## Name and Address of New Registered Agent:

DORAN, DARREN  
17578 48TH COURT NORTH  
LOXAHATCHEE, FL 33470 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 J. CASSELLS

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VS ( ) Delete  
Name: DORAN, DARREN  
Address: 6138 NW 19TH ST  
City-St-Zip: MARGATE, FL 33063

Title: PT ( ) Delete  
Name: CASSELLS, MICHAEL J  
Address: 8302 NW 73RD TERR  
City-St-Zip: TAMARAC, FL 33321

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VS (X) Change ( ) Addition  
Name: DORAN, DARREN  
Address: 17578 48TH COURT NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

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: MICHAEL J. CASSELLS

PT

04/27/2005

Electronic Signature of Signing Officer or Director

Date