

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000072364

FILED  
May 01, 2003  
Secretary of State

**Entity Name:** DOCTORS CORPORATION OF AMERICA

**Current Principal Place of Business:**

555 SW 148TH AVE  
SUNRISE, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

555 SW 148TH AVE  
SUNRISE, FL 33325

**New Mailing Address:**

**FEI Number:** 65-0868429

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOMBART, ALLEN  
13132 BARWICK ROAD  
DELRAY BEACH, FL 33445 US

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

BOMBART, ALLEN  
555 SW 148TH AVE  
SUNRISE, FL 33325 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: \_\_\_\_\_

Electronic Signature of Registered Agent

05/01/2003

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOMBART, ALLEN  
Address: 555 SW 148TH AVE  
City-St-Zip: SUNRISE, FL 33325

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ALLEN BOMBART

Electronic Signature of Signing Officer or Director

P/D

05/01/2003

Date