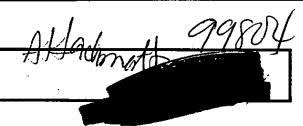
FILED Sep 22, 2002 8:00 am Secretary of State 08-29-2002 90003 037 ***150.00

FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P9900	0015134	4			·	0 23 2002	. 20002	, 05,	150.0
DOCTOR RECOMMENDED, INC	· ·						प्रस	804	ſ
DO NOT WRITE	IN THIS S	PAC	È			*	<i></i>	004	
2. Principal Place of Business 20161 NE 16th Place	3. Mailing Address 20161 NE 16th	ı Pla	ce						
Suite, Apt. #, etc. #1	Suite, Apt. #, etc. #1				DO NOT V	VRITE IN THIS	SPACE		
. City & State Miami FL	City & State Miami FL			4. FEI Number 65-0195329				Applied Fo	
Zip Country 33179 USA	Zip 33179	Coun	try SA	5. Certificate of Statu		s Desired □ \$8.75		5 Additional equired	
DO NOT W	DITE	المجسمت	Name Ste	7. Name and Address of Current Registered Agent Steven Hoffman					
IN THIS SP			Street Address (P	O. Box Number	r is Not Accept	Place	# 1		
		5.4 	City Hion			FL	ZigC	3 179	\dashv
8. The above named entity submits this statement for SIGNATURE Signature: typed or printed name of registered agent and printed name of registered agent and printed name of registered agent and statisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)		E: Registered flay 1 Fe 1; Fee is d UBR is	7 Agent signeture requirert w re lis \$150.00 s \$550.00 s \$61.25	tion reinstating)	ation Campaign	DATE		5.00 May B	
11. OFFICERS AND D ITHE President Steven H. Hoffman 20161 NE 16th Plac Miami FL 33179	RECTORS	TITLE NAME STREE	T'ADDRESS ST. ZIP						CR2E034B (12/01)
NAME STREET ADDRESS T CITY-ST-ZIP			T ADDRESS ST-ZIP				,		ీక
TITLE NAME STREET ADDRESS CITY-SI-ZIP	-	HAME STREE CITY:	TADORESS	DC	TON.C	.WRI	Γ.E.,	يريون نمو داد	
TITLE		NAME STREET CITY-S	T ADDRESS	'iN	THIS	SPAC	E		
HTLE NAME STREET ADDRESS CITY-S1-ZIP		TITLE NAME STREET CITY-S	ADORESS IT-ZEP						
TITLE NAME STREET ADDRESS CITY-S1-ZEP		TITLE NAME STREET CITY-S	ADDRESS						•
13. I hereby certify that the information supplied with the indicated on this report or supplemental report is to of the corporation or the receiver or trustee emporattachment with an address, with all other like emporattachment with an address, with all other like emporation. SIGNATURE:	vered to execute this report	t as requi	red by Chapter 607,	on 119.07(3)(i), ne legal effect a Florida Statute: 8/20/2(s: and that my r	r dath; that I an name appears	in Block 1	information er or director 11 or on an	



DRecommended, Inc.



August 26, 2001

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

After speaking with Steven in the State of Florida/UBR Division, please find enclosed our check for the annual report/uniform business report for Doctor Recommended, Inc.

The recent change of location of our office obviously accounts for our not receiving the form for filing prior to this time.

Please make note of our new address in your records.

Very truly ours,

DR RECOMMENDED, INC.

Steven H. Hoffman

President

SHH/cfc

Enclosure

20161 NE 16th Place

Suite #1

Miami FL 33179

Phone: 305-770-2616

Fax: 305-770-2617