

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086225

Entity Name: THE METAL DOCTOR, INC.

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

5207 S.W. 20TH PLACE
CAPE CORAL, FL 339146825

New Principal Place of Business:

1144 MOHAWK PRKY
CAPE CORAL, FL 339146825

Current Mailing Address:

5207 S.W. 20TH PLACE
CAPE CORAL, FL 339146825

New Mailing Address:

1144 MOHAWK PRKY
CAPE CORAL, FL 339146825

FEI Number: 65-0952937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAGORAC, JEFFREY L
5207 S.W. 20TH PLACE
CAPE CORAL, FL 339146825 US

Name and Address of New Registered Agent:

SAGORAC, JEFFREY L
1144 MOHAWK PRKY
CAPE CORAL, FL 339146825 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: JEFF SAGORAC

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAGORAC, JEFFREY L
Address: 5207 S.W. 20TH PLACE
City-St-Zip: CAPE CORAL, FL 339146825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAGORAC, JEFFREY L
Address: 1144 MOHAWK PRKY
City-St-Zip: CAPE CORAL, FL 339146825

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JEFF SAGORAC

PRES

04/17/2006

Electronic Signature of Signing Officer or Director

Date