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

PROFIT CORPORATION ANNUAL REPORT 1996 DOCUMENT # S
1. Corporation Name
CAREER DOCTOR, INC.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

(8)



Principal Place of Business 2196 COUNTRY CLUB BLVD. DEERFIELD BEACH FL 33442		Mai	Mailing Address 2196 Country Club BLyD. DEERFIELD BEACH FL 33442							
							3. Date Incorporated or Qualified 01/24/1991	3a. Date	04/27/1995	
2. Principal Piace o	<u>}</u> -	2a. Mairing Address				4. FEI Number 65-0335942	<u> </u>	Applied For Not Applicable		
Suite, Apt. #. etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State			City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 24	Country 25	29	Zıp	Country			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
9. Name and Address of Current Registered Agent					Τ	10. Name and Address of New Registered Agent				
LLOYD L CADWELL					81 82	Name Street Addr	ess (P.O. Box Number is Not Acceptab	ie)		
2196 COUNTRY CLUB BLVD SUITE 115 DEERFIELD BEACH FL 33442				83						
OCLI II ICC	D DE COULT E COULT				84	City		FL	85 Zip Code	
or registered a familiar with, a	ne provisions of Sections 607. agent, or both, in the State of and accept the obligations of,	Florida, Such Section 607.0	change was 0505, Florida	authorized by the	corp	oration's Doar	ation submits this statement for the pur d of directors. I hereby accept the app	rpose of cha ointment as	anging its registered office registered agent. I am	

	3	T in	NID DIRECTORS IN 12	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Add tion
TITLE	CAPUELL LI OVD	1 1 TITLE	President	Change Not non
NAME	CADWELL, ILOYD L. 2196 COUNTRY CLUB PRIVE 131 V d.	1.2 NAME	cadwell, House his	e11
STREET ADDRESS		13 STREET ADDRESS	2196 country club	E1 38443
CITY ST-ZIP	DEERFIELD BEACH FL	1.4 CHY - ST-ZIP	Deerfield Brach	FL 33442
TITLE	☐ DELETE	2 1 TITLE		Change Addition
NAME		2 2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY ST-ZIP		
TITLE	DELEIE	3 1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		33 STHEET ADDRESS		
CITY-S1-ZIP		3.4 CITY - ST - ZIP		
TITLE	☐ DELETE	4 1 TITLE		Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - S* - 7.P		
TITLE	[] DELETE	5.11111.6		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-SI-ZIF		5.4 CITY - ST - ZIP		
TITLE	☐ DELETE	€ ITILE	}	Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
1 1			ľ	

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 attactment with an address.

SIGNATURE: