2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0200005767

1. Entity Name

GULFSTREAM GUARDIAN ANGEL ROTTWEILER RESCUE. INC



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90183 014 ****61.25

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| Principal Place of Business 2950 SW 103 AVENUE MIAMI FL 33165 | | Mailing Address 2950 SW 103 AVENUE MIAMI FL 33165 | | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | |
| 2. Principal | Place of Business | 3. Mailing Address | | | | | | | |
| | | G. Mailing Address | | ' | IBBIILBI ESI BBIIB II | OLI KOKII ÜBILI ÇBI | II EBIM BOYAY BYIYI IADIB | Ditti toot toot | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | | | |
| City & State | | City & State | | 4. FEI | Number | 1886 | | Applied For | 7 |
| Zip | Country | Zip | Country | | ificate of Status | | \$8.75 A | dditional | 1 |
| | 6. Name and Address of Current | Registered Agent | ر بر م نجب ات ا | | e and Address | of New Regi | stered Agent≓ | · <u></u> | 1 |
| | | | Name | | | <u>~</u> | | | 1 |
| ACOSTA, GRACE 2950 SW 103 AVENUE | | | Street Addr | ress (P.O. Box I | Number is Not | Acceptable) | | | ┨ |
| MIAMI F | | | | | | · · · · · | | 1 | 4 |
| ************************************** | 2 00 100 | | | | | | | | |
| | | | City | | | | FL Zip Co | ode | 1 |
| 8. The abov | e named entity submits this statement for | r the purpose of changing its i | registered office or reg | gistered agent, | or both, in the | State of Florida | a. I am familiar with | n, and accept | 1 |
| trie obliga | ations of registered agent. | • | | | | | | | |
| SIGNATURE | | | | | | | | | |
| | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: | : Registered Agent signature re | equired when reinstal | ing) | | DATE | | |
| | ₩. · | ****** | riagiatoros rigora bigrittata re | -4 | | | | | |
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| | FILE NOW: FEE IS \$61.25 | 9. Election Cam | paign Financing | \$5.00 | May Be | Make | Check Payable | e to | |
| | | | paign Financing | <u> </u> | May Be | Make | | e to | |
| 10. | FILE NOW: FEE IS \$61.25 | 9. Election Cam Trust Fund Co | paign Financing | \$5.00 Added to | May Be Fees | Make Florida i | Check Payable Department of | e to State | |
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

SEMINOLE FL 33772

SKaller Oge

CATHERIN CRESPO

2-18-03