

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022194

FILED
Jan 11, 2005
Secretary of State

Entity Name: ANIMAL WRAPPERS AND DOGGIE WRAPPERS, INC.

Current Principal Place of Business:

5265 NW 108 AVENUE
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

5265 NW 108 AVENUE
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 65-0998917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILBERBERG, GAIL
5265 NW 108 AVENUE
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: SILBERBERG, GAIL
Address: 537 SPINNAKER
City-St-Zip: WESTON, FL 33326

Title: SVD () Delete
Name: SILBERBERG, ANDREW
Address: 537 SPINNAKER
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SILBERBERG, GAIL
Address: 2694 OAKMONT
City-St-Zip: WESTON, FL 33332

Title: SVD (X) Change () Addition
Name: SILBERBERG, ANDREW
Address: 2694 OAKMONT
City-St-Zip: WESTON, FL 33332

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: GAILSILBERBERG

PRES

01/11/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date