

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152642

Entity Name: LA BONE PET SPA, INC.

FILED  
Jan 17, 2006  
Secretary of State

## Current Principal Place of Business:

5609 S. UNIVERSITY DR.  
DAVIE, FL 33328

## New Principal Place of Business:

1851 SW 136TH AVE  
DAVIE, FL 33325

## Current Mailing Address:

5609 S. UNIVERSITY DR.  
DAVIE, FL 33328

## New Mailing Address:

1851 SW 136TH AVE  
DAVIE, FL 33325

FEI Number: 30-0220798

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PAUL, CRISTOBAL  
5609 S. UNIVERSITY DR.  
DAVIE, FL 33328 US

## Name and Address of New Registered Agent:

PAUL, CRISTOBAL  
1851 SW 136TH AVE  
DAVIE, FL 33325 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: CRISTOBAL PAUL

01/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PAUL, JENNIFER  
Address: 5609 S. UNIVERSITY DR.  
City-St-Zip: DAVIE, FL 33328

Title: P ( ) Delete  
Name: PAUL, CRISTOBAL  
Address: 5609 S. UNIVERSITY DR.  
City-St-Zip: DAVIE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PAUL, JENNIFER  
Address: 1851 SW 136TH AVE  
City-St-Zip: DAVIE, FL 33325

Title: P (X) Change ( ) Addition  
Name: PAUL, CRISTOBAL  
Address: 1851 SW 136TH AVE  
City-St-Zip: DAVIE, FL 33325

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: CRISTOBAL PAUL

P

01/17/2006

Electronic Signature of Signing Officer or Director

Date