## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000088213

Entity Name: 36 DOGS INC

City-St-Zip:

FILED Mar 30, 2009 Secretary of State

| Entity Name: 36 DOG   | IS INC                             |  |  |  |
|---|------------------------------------|--|--|--|
| Current Principal Place of Business:                        |                                    | New Principal Place of Business:                         |  |  |
| 7620 66TH STREET N<br>PINELLAS PARK, FL 3                   | 3781                               |  |  |  |
| Current Mailing Address:                                    |                                    | New Mailing Address                                      | New Mailing Address:                         |  |
| 7620 66TH STREET N<br>PINELLAS PARK, FL 3                   | 3781                               |  |  |  |
| FEI Number: 80-0267784                                      | FEI Number Applied For ( )         | FEI Number Not Applicable ( )                            | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent:               |                                    | Name and Address of                                      | Name and Address of New Registered Agent:    |  |
| TRIPP, SARAH O<br>7620 66TH STREET N<br>PINELLAS PARK, FL 3 | 3781 US                            |  |  |  |
| The above named entity in the State of Florida.             | v submits this statement for the p | ourpose of changing its registered                       | office or registered agent, or both,         |  |
| SIGNATURE:  |                                    |  |  |  |
| Electronic Signature of Registered Agent                    |                                    | ent  | Date   |  |
| Election Campaign Financi                                   | ng Trust Fund Contribution ( ).    |  |  |  |
| OFFICERS AND DIRECTORS:                                     |                                    | ADDITIONS/CHANGE   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title: ( Name: Address:                                     | ) Delete                           | Title: OWNE<br>Name: TRIPP, SARA<br>Address: 7620 66TH S |  |  |

City-St-Zip: PINELLAS PARK, FL 33781

I hereby certify that the information supplied with this filing does not qualify 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: SARAH TRIPP PRES 03/30/2009