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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1997 8:00am

Secretary of State

4197 5616942386

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000030445 (6)

SRR ROSE PET-ALL, INC.

Principal Place of Business

SIGNATURE:

3896 BURNS ROAD #2 3896 BURNS ROAD #2 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410-4222 3. Date Incorporated or Qualified 3a. Date of Last Report 04/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 45.0<u>66030</u> 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 25 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RUMPOLO, SUSAN R 3896 BURNS ROAD #2 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33410 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typical or protections of pegaterical agent and the inflavorable. (NOTE: Registered Agent signature required when reinstating)

DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Change DELETE 11 TITLE DRE RUMPOLO, SUSAN R 1.2 NAME 3896 BURNS ROAD #2 1.3 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410 1.4 CITY - ST - ZIP CHIY-SI-7P Addition DELETE Change 2.1 TITLE TIBLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-S1-2II DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-7/P 3.4. CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP City - St - 7IP DELETÉ Change Addition Title 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-\$T-ZIP City - St - ZiP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP CITY - ST - ZIP

14. I do 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 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