

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90101 032 ***150.00

DOCUMENT # P96000070086

1. Entity Name
JUST PAW-FECT, INC.



Principal Place of Business
**203 150 AVE
MADERIA BEACH FL 33708**

Mailing Address
**203 150 AVE
MADERIA BEACH FL 33708**



2. Principal Place of Business
6262-142nd Av. N.

Suite, Apt. #, etc.
806

City & State
Clearwater FL

Zip
33760

Country

3. Mailing Address
Same

Suite, Apt. #, etc.

City & State

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3395358**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FLOOD, KEVIN P
144 MAITLAND AVE STE A
ALTAMONTE SPRINGS FL 32715**

7. Name and Address of New Registered Agent

Name **Patrick Robson**
Street Address (P.O. Box Number is Not Acceptable)

**205-150th Avenue
City Madeira Beach FL Zip Code 33708**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-13-2003

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLATTERY, TIMOTHY 2612 W. GRAND RESERVE CIR. #210 CLEARWATER FL 34624	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLATTERY, NANCY E 2612 W. GRAND RESERVE CIR #210 CLEARWATER FL 34624	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	6262-142nd Av. N. #806 Clearwater, FL 33760	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6262-142nd Av. N. #806 Clearwater, FL 33760	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 607, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-03

Date

Daytime Phone #

CR2E034 (10/02)