

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91405 037 ***158.75

0327960
AV

DOCUMENT # V06270

1. Entity Name

PEDIGREE PERFECTION INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

3408 PEARTREE CIR

3408 PEARTREE CIR

~~S-116~~

~~S-116~~

LAUDERHILL FL 33319

LAUDERHILL FL 33319

US

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

NONE

Suite, Apt. #, etc.

NONE

City & State

City & State

4. FEI Number

65-0325551

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SOLOMON, IRVING

3408 PEARTREE CIR

~~S-116~~

NONE

LAUDERHILL FL 33319

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

[Signature]

IRVING SOLOMON

3/15/02

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D SOLOMON, IRVING**
STREET ADDRESS **3408 PEARTREE CIR**
CITY-ST-ZIP **LAUDERHILL FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D SOLOMON, PHYLLIS**
STREET ADDRESS **3408 PEARTREE CIR**
CITY-ST-ZIP **LAUDERHILL FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D MELORE, RHONDA S**
STREET ADDRESS **3409 ROSE HILL WAY**
CITY-ST-ZIP **LAUDERDALE HILL FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 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

IRVING SOLOMON

3/15/02

Date

954-731-2692

Daytime Phone #

CR2E034 (9/01)