2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED
Apr 24, 2006 08:00 AN
Secretary of State

1. Enlity Name ELITE PET PRODUCTS, INC.					Secretary of State
Principal Plac 1994 NW 55 MARGATE, F		Mailing Address 1994 NW 55TH AVE MARGATE, FL 33063			(1 #8(41 8/150 8/16) 18(7) 44(7 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1 8)8(1
E	OO NOT WRITE		CE	04152006 4. FEI Numb 59-192	
6. Name and Address of Current Registered Agent RAMMAIRONE, JOSEPH 1994 NW 55 AVE MARGATE, FL 33063				-	NOT WRITE THIS SPACE
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. Typed or printed name of registered agent and site if applicable. (NOTE. Registered Agent signature required when reinstating) DATE					
After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00			.00 May Be ded to Fees	05/06/06-80079-011 158.75
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P RAMMAIRONE, JOSEPH 1994 NW 5TH AVE MARGATE, FL 33063	RECTORS			
NAME STREET ADDRESS CITY-ST-ZIP TITLE					
NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
THILE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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.					