

FOOOOOOOO 4669

TRANSMITTAL LETTER

To: Registration Section  
Division of Corporations

SUBJECT: ANIMAL STOPPERS, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

300003347553--1  
-08/07/00--01039--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",  
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to  
transact business in Florida.

Please return all correspondence concerning this matter to the following:

W-19647

HENRY COSTANZO SR

(Name of Person)

ACCOUNTING ASSOCIATES

(Firm/Company)

3163 CANTON ROAD, STE C

(Address)

MARIETTA GA 30066

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

HENRY COSTANZO SR at ( 770 )

(Name of Person)

423-9440 (fax 770-428-2780)

(Area Code & Daytime Telephone Number)

FILED  
00 AUG 17 AM 1:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

mtu  
8/17

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

August 9, 2000

HENRY CONSTANZO SR  
3163 CANTON RD, STE C  
MARIETTA, GA 30066

SUBJECT: ANIMAL STOPPERS, INC.  
Ref. Number: W00000019647

We have received your document for ANIMAL STOPPERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent cannot be the company itself.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 700A00042942

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. ANIMAL STOPPERS, INC  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. GEORGIA 3. 58-2446537  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 02-26-99 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 4150 CRIPPLE CREEK WAY NW KENNESAW GA 30144-2165  
(Principal office address)
- b. 4150 CRIPPLE CREEK WAY NW KENNESAW GA 30144-2165  
(Current mailing address)
8. PEST CONTROL  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: ~~ANIMAL STOPPERS INC~~ MIGUEL SANTANA  
Office Address: 6652 THORUHYLL COURT  
BOGA RATON, Florida 33433  
(Zip code)
10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature) MIGUEL A SANTANA

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: MIGUEL A SANTANA

Address: 4150 CRIPPLE CREEK WAY NW KENNESAW GA 30144-2165

Vice Chairman: JENNIFER M SANTANA

Address: 4150 CRIPPLE CREEK WAY NW KENNESAW GA 30144-2165

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: MIGUEL A SANTANA

Address: 4150 CRIPPLE CREEK WAY NW KENNESAW GA 30144-2165

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

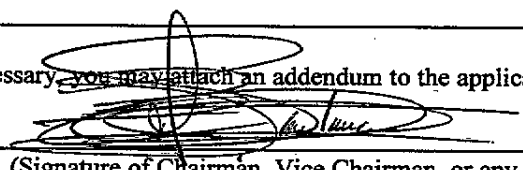
Secretary: JENNIFER M SANTANA

Address: 4150 CRIPPLE CREEK WAY NW KENNESAW GA 30144-2165

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  MIGUEL A SANTANA  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MIGUEL A SANTANA President & Chairman  
(Typed or printed name and capacity of person signing application)

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 001881199  
CONTROL NUMBER : K909882  
DATE INC/AUTH/FILED: 02/26/1999  
JURISDICTION : GEORGIA  
PRINT DATE : 07/06/2000  
FORM NUMBER : 211

ANIMAL STOPPERS, INC.  
ATTN: MIGUEL A SANTANA  
4150 CRIPPLE CREEK WAY NW  
KENNESAW, GA 301442165

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**ANIMAL STOPPERS, INC.**  
**A DOMESTIC PROFIT CORPORATION**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox  
Secretary of State