

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G06392** (6)
1. Corporation Name
DOG MASTER, INC.



Principal Place of Business % ROBERT G. MARCUS 13500 N KENDALL DR STE 130 MIAMI FL 33186	Mailing Address % ROBERT G. MARCUS 13500 N KENDALL DR STE 130 MIAMI FL 33186
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 13500 N. KENDALL DRIVE Suite, Apt. #, etc. 22 SUITE 140-3 City & State 23 MIAMI FL Zip 24 33186		2a. Mailing Address 26 13500 N. KENDALL DRIVE Suite, Apt. #, etc. 27 SUITE 140-3 City & State 28 MIAMI FL Zip 29 33186		3. Date Incorporated or Qualified 10/28/1982	
		4. FEI Number 59-2234358		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

MARCUS, ROBERT G.
13741 S.W. 84TH ST. UNIT D
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name MARCUS, ROBERT G.
82 Street Address (P.O. Box Number is Not Acceptable) 3209 S.W. 173RD TERRACE
83
84 City MIRAMAR
85 Zip Code FL 33029

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT MARCUS, ROBERT G. 13741 S.W. 84 ST #D MIAMI, FL 00000	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DPT MARCUS, ROBERT G. 3209 S.W. 173rd TERRACE MIRAMAR FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARCUS, KAREN 13741 SW 84 ST #D MIAMI FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V MARCUS, KAREN 3209 S.W. 173RD TERRACE MIRAMAR FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Robert G. Marcus** ROBERT G. MARCUS

4/21/98

(305) 385-2036

CR2E034 (10/97)