

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 02, 2000 8:00 am
Secretary of State

08-02-2000 90123 010 ***550.00

DOCUMENT # G71248

1. Entity Name
CINDI'S PET CENTER, INC.

Principal Place of Business

**723 17TH ST.
 VERO BEACH FL 32960**

Mailing Address

**721 S US HWY 1
 VERO BEACH FL 32962-4702
 US**

**4446 61ST COURT
 VERO BEACH FL 32967**

2. Principal Place of Business

4446 61ST CT

3. Mailing Address

4446 61ST CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

VERO BEACH FL

City & State

VERO BEACH FL

4. FEI Number

59-2350639

Applied For

Not Applicable

Zip

32967

Country

USA

Zip

32967

Country

USA

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

SHORTLE, CINDI

721 S US HWY 1

VERO BEACH FL 32960

**4446 61ST COURT
 VERO BEACH FL 32967**

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, typed 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 \$550.00
 After SEPTEMBER 13, 2000 Min. will be \$750.00
 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 **DP** ☐ Delete
 NAME **MILLER-SHORTLE, CINDI**
 STREET ADDRESS **4446 61ST CT**
 CITY-ST-ZIP **VERO BEACH FL**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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:

CINDI A MILLER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/00
 Date

Daytime Phone #

CR2E034 (5/00)

Attachment

G71248
DW75691

I believe I am entitled to a refund of the penalty of \$250⁰⁰. The Paperwork and forms for this was sent to the wrong Addressee and I did not receive them until July 21st 2000.

The Correct Address is

4446 61st COURT

Vero Beach Fl 32967

561-567-1309

Cindi Miller