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

 PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J69396

1. Corporation Name

1. Little Purple From Pool Chapter | 10

(6)

Mailura Addrose

LI'L PIDDLERS DOG GROOMING, INC.

FILED Apr 02 1998 8:00am Secretary of State



rilliciparriac	6 Or Dusinoss	Maning Mothess			
830 E OAKLAND PK BLYD FT LAUDERDALE FL 33334 US		830 E OAKLAND PK BLVD FT LAUDERDALE FL 33334 US		DO NOT WRITE IN T	HIS SPACE
l				 Date Incorporated or Qualified 04/24/1987 	
2 Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2102	NE 68 St.	26 2102 NE	68 St.	65-0002794	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	000.		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State 23 Ff. L	auderdale, Fl Country U.S.	City & State 28 FT. Lander		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 333	25 Broward		Country U. S.1 30 Broward		Yes No
		t Hegistered Agent	81 Name	10. Name and Address of New Registe	reo Agent
	ER, CONSTANCE H				
)2 NE 68 ST RT Lauderdale FL 9 9994-3-3	206	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
, FU	NI LAUDENDALE PL 33334799	<i>90</i> 8	83		
1			<u> </u>		
1			84 City	1	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corp		
office or r	ogistered agent, or both, in the State m familiar with, and account the oblica	of Florida, Such change was au ations of Section 607 0505. Flor	uthorized by the corpora	poration submits this statement for the purpo tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE			The Clare of the Control of the Cont		
SIGNATURE	Signature, typed or printed name of registered age	of and little if apply able (NOTE	Registered Agent signature requi	ired when reinstating) DA	TE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	VIGER, CONSTANCE H.		1.2 NAME		
STREET ADDRESS	2102 NE 68 ST	0	1.3 STREET ADDRESS	,	
CITY-ST-ZIP	FT LAUDERDALE FL 303		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	ZONA, THERESE E.		2.2 NAME		
STREET ADDRESS	2102 NE 68 ST	4	2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 333		2. 4 CITY-ST-ZIP		
TITLE		DELÉTÉ	3.1 TITLE	• 1	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TOLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	,		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			64 CITY-ST-ZIP		
	notify that the information assemble of a	itte thin films stone and smallby to		Section 119 07(3)(i) Florida Statutes, Lifurth	

4. 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 eath; 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 chapter 60, you an attachment with an address.

SIGNATURE:

13.20.98 954 149200 Date Degring Phone #