## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Feb 12, 2007 08:00 AM DOCUMENT # J70667 **Secretary of State** 1. Entity Namo DISCOUNT PETS, INC. Principal Place of Business Mailing Address 5243 GALL BLV 5243 GALL BLV ZEPHYRILLS FL 33541 ZEPHYRILLS FL 33541 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E034 (10/06) City & Stato City & Stato 4. FEI Numbor Applied For 59-2729660 Not Applicable Zιp Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo TANNER, WAYNE 5243 GALL BLV. STE 1 ZEPHYHILLS FL 33541 Street Address (P.O. Box Number is Not Acceptable) City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida and familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little r applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PVTS Change Addition TITLE Delete THE U00000632678 TANNER, WAYNE NAME NAM 02/21/07-80033-001 150.00 5243 GALL BLV. STE #1 STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33542 CITY-ST-7/P CITY-S1-ZIP TITLE ☐ Delete TITLE ☐ Change Addition TANNER, WAYNE NAMI 5243 GALL BLV. STE #1 STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33542 CHY-SI-ZIP CITY-SI-ZIP ☐ Change TITLE □ Delete TITLE ■ Addition TANNER, WAYNE NAME NAME 5243 GALL BLV. STE #1 STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33542 CHY-ST-ZIP CITY-ST-ZIP Delete THLE Addition OLIVER, MARGIE V. NAME NAME 38318 PINE TERRACE STREET ADDRESS STREET ADDRESS DADE CITY FL 33523 CITY-ST-ZIP CITY-ST-ZIP Delete DIO ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STRLET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-S1-ZIP

12. I horoby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 each; 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.

President

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wayne Tanner

2/9/07

813-782-6333

Daytime Phone **4**