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

## CORPORATION **ANNUAL REPORT**

1998

2. Principal Place of Business

Suite, Apt. #, etc

City & State

Zip

22

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K16671

25

KOLODZESKI, LARRY 1141 LANDMARK LANE

CASSELBERRY FL 32707

(5)

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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THE PET WATCHERS, INC.

Principal Place of Business Mailing Address 1141 LANDMARK LANE POST OFFICE BOX 900 CASSELBERRY FL 32707 WINDERMERE FL 34786-0930

9, Name and Address of Current Registered Agent

**FILED** Apr 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

Yes

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

03/02/1988

59-2873040

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number

			L						
			84	City		FL	85	Zip Ç	ode
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 familier with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or proted name of registered epent and title if applicable (NOTE: Registered Agent signature required when reinstating) OATE									
12. OFFICERS AND DIRECTORS			13.	in arginature is	ADDITIONS/CHANGES 1		O DIRE	CTORS	N 12
TITLE	PD	DELETE	1.1 TITLE		DIRECTOR		Ch Ch		Addition
NAME	KOLODZESKI, LARRY		1.2 NAME	- (	KOLODZESKI ROBI	ERT			
STREET ADDRESS	1141 LANDMARK LANE		1.3 STREET	ADDRESS	KOLODZESKI ROBI	<b>3</b> .			- 1
CITY-ST-ZIP	CASSELBERRY FL		1.4 CITY - S		CASSELBERRY, F	FL 327	07		
TITLE	D	DELETE	2.1 TITLE	(- 4.1)			☐ Ch	ange	Addition
NAME	KOLODZESKI, FLO	~	2.2 NAME	l			-	-	
STREET ADDRESS	1141 LANDMARK LANE		2.3 STREET	ADDRESS					
CITY-ST-ZIP	CASSELBERRY FL		2.4 CITY-5						
TITLE		DELETE	3.1 TITLE				Ch	ange	☐ Addition
NAME			3.2 NAME						i
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY-5	37-ZIP					
TITLE		DELETE	4.1 TITLE				Ch	ange	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					Ì
CITY-ST-ZIP			4.4 CITY - S	T - ZIP					
TITLE		☐ DELETE	5.1 TITLE				☐ Ch	ange	Addition
NAME			5.2 NAME	}					-
STREET ADDRESS			5.3 STREET	address					
CITY - ST - ZIP			54 CITY-S	1 - ZIP					
TITLE		DELETE	61 TITLE				☐ Ch	ange	Addition
NAME			6.2 NAME	1					
STREET ADDRESS			6.3 STREET	ADORESS					-
CITY - ST - ZIP			6.4 CITY-S						
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:  **Continued The Information stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii) Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii) Florida Statutes. I further certificated in Section 119.07(3)(ii) Florida Statutes. I further certificated in Section 119.07(3)(ii) Florida Statutes. I further certificated in Section 119.07(3)(iii) Florida Statutes. I further certificated in Section 119									
SIGNATURE: Jarry Jolowy Liz M. KOLODZESX 1, LAKY (Jaw 15, 1998)									

Country

81 Name

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