2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2005
Secretary of State

DOCUMENT# N02000008692

Entity Name: SAVE THE PETS, INC.

Current Principal Place of Business:

PO BOX 452348
SUNRISE, FL 33345

New Principal Place of Business:

Current Mailing Address:

PO BOX 452348
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 48-1286047 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GUTSTADT, MICHELE
967 CORAL CLUB DR.
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: FD ( ) Delete
Name: DRYER, KIMBERLY
Address: 731 SW 113 TER
City-St-Zip: PEMBROKE PINES, FL 33025

Title: PD ( ) Delete
Name: GUTSTADT, MICHELE
Address: 967 CORAL CLUB DR.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD ( ) Delete
Name: HEISLER, DAWN
Address: 108 SE 23RD ST
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: D ( ) Delete
Name: BORGES, VICTORIA
Address: 11431 NW 31ST PL
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELE GUTSTADT PD 05/18/2005

Electronic Signature of Signing Officer or Director — Date