2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008692

FILED Apr 29, 2006 Secretary of State

Entity Name: SAVE THE PETS, INC. **Current Principal Place of Business: New Principal Place of Business:** PO BOX 452348 SUNRISE, FL 33345 **Current Mailing Address: New Mailing Address:** PO BOX 452348 SUNRISE, FL 33345 FEI Number: 48-1286047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUTSTADT, MICHELE GUTSTADT, MICHELE 967 CORAL CLUB DR. 821 RICH DR. CORAL SPRINGS, FL 33071 US 207 DEERFIELD BEACH, FL 33441 US 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: 04/29/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition DRYER, KIMBERLY Name: Name: Address: 731 SW 113 TER Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition Name: GUTSTADT, MICHELE Name: GUTSTADT, MICHELE Address: 967 CORAL CLUB DR. Address: 821 RICH DR. #207 City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: DEERFIELD BEACH, FL 33441 Title: VD () Delete Title: () Change () Addition HEISLER, DAWN Name: Name: Address: 108 SE 23RD ST Address: City-St-Zip: FT. LAUDERDALE, FL 33316 City-St-Zip: Title: () Delete Title: () Change () Addition BORGES, VICTORIA Name: Name: Address: 11431 NW 31ST PL Address: City-St-Zip: SUNRISE, FL 33323 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 04/29/2006