

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009258

FILED
Aug 02, 2006
Secretary of State

Entity Name: SABBATH MEMORIAL DOG RESCUE CENTER, INC.

Current Principal Place of Business:

3777 NW 46 ST
MIAMI, FL 33142

New Principal Place of Business:

13100 NE 3RD CT
MIAMI, FL 33161

Current Mailing Address:

3777 NW 46 ST
MIAMI, FL 33142

New Mailing Address:

13100 NE 3RD CT
MIAMI, FL 33161

FEI Number: 65-1179917 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:

COY, ROBERT
3777 NW 46 ST
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

COY, ROBERT
13100 NE 3RD CT
MIAMI, FL 33161 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: _____

08/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COY, ROBERT
Address: 13100 NE 3 CT
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: SINISCALCHI, KATHLEEN
Address: 3777 NW 46 ST
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: COY, ELLEN
Address: 13100 NE 3 CT
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SINISCALCHI, KATHLEEN
Address: 13100 NE 3RD CT
City-St-Zip: MIAMI, FL 33161

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 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: ROBERT COY

PRES

08/02/2006

Electronic Signature of Signing Officer or Director

Date