2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2008
Secretary of State

DOCUMENT# N05000010037

Entity Name: PETS IN DISTRESS OF MIAMI, INC.

Current Principal Place of Business:

18491 SW 268TH STREET
HOMESTEAD, FL 33031

New Principal Place of Business:

Current Mailing Address:

18491 SW 268TH STREET
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 13-4338264 **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:

PLASS, BETTY
18491 SW 268TH ST.
HOMESTEAD, FL 33031 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: D ( ) Delete
Name: PLASS, BETTY W
Address: 18491 SW 268TH ST.
City-St-Zip: MIAMI, FL 33031

Title: D ( ) Delete
Name: DACKS, JANE
Address: 8265 SW 140TH AVE
City-St-Zip: MIAMI, FL 33183

Title: D ( ) Delete
Name: ESCOBAR, YLEANA
Address: 9778 SW 147 PLACE
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PLASS, BETTY W
Address: 18491 SW 268TH ST.
City-St-Zip: MIAMI, FL 33031

Title: SD (X) Change ( ) Addition
Name: CASE, MARGARET
Address: 18491 SW 268TH ST
City-St-Zip: HOMESTEAD, FL 33031

Title: TD (X) Change ( ) Addition
Name: KYNERD, SANDRA
Address: 18491 SW 268TH STREET
City-St-Zip: HOMESTEAD, FL 33031

I hereby certify that the information supplied with this filing does not qualify 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: BETTY PLASS PD 07/31/2008

Electronic Signature of Signing Officer or Director — Date