

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012614

FILED  
May 01, 2008  
Secretary of State

Entity Name: K-9 FOR LOVE INC.

**Current Principal Place of Business:**

19650 SW 214 ST  
MIAMI, FL 33187

**New Principal Place of Business:**

**Current Mailing Address:**

19650 SW 214 ST  
MIAMI, FL 33187

**New Mailing Address:**

FEI Number: 72-1609138      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:**

**Name and Address of New Registered Agent:**

LUIS, ADELAIDA T  
19650 SW 214 ST  
MIAMI, FL 33187      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: LUIS, ADELAIDA T  
Address: 19650 SW 214 ST  
City-St-Zip: MIAMI, FL 33187 US

Title: VP      ( ) Delete  
Name: KONICKI, PATRICIA  
Address: 936 STOTT LANE  
City-St-Zip: SEYMOUR, TE 37865

Title: S      ( ) Delete  
Name: GONZALEZ, BRITTANY SECRETA  
Address: 7770 SUNSET DR  
City-St-Zip: MIAMI, FL 33143 US

Title: TREA      ( ) Delete  
Name: LUIS, JUAN F TREASURE  
Address: 19650 SW 214 ST  
City-St-Zip: MIAMI, FL 33187 US

**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 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: ADELAIDA T. LUIS

PRES

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date