FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

FILED

96 SEP 23 M 8: 25

DIVISION OF CORPORATIONS

1996

DOCUMENT # N94000002351 (4)

PETS AND PEOPLE, INC.

SECRETARY OF STATE Principal Place of Business Malling Address 9990 SW 77TH AVE. 9990 SW 77TH AVE. SHITE 313 SHITE 313 MIAMI FL 33156 MIAMI FL 33156 3a. Date of Last Report 3. Date Incorporated or Qualified 05/10/1994 09/25/1995 4. El Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 1301 EAST RIOLD VILLAGE APPLIED FOR 65-06 11.365 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 MIRM Trust Fund Contribution Added to Fees Zιο Country Country 8. This corporation has liability for intangible tax under s. 199.032, USA Florida Statutes Yes Mo 25 20 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MICHAEL L. BERGER, J.D., LL.M., P.A. Street Address (P.O. Box Number is Not Acceptable) 82 9990 SW 77TH AVE. 83 SUITE 313 MIAMI FL 33156 84 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title 4 applicable (NOTE: Registered Agent's gnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. □ DELETE 1 S TITLE THE 1.2 NAME NAME CATHERIVE NASH CR2E037 1301 EAST RIDGE VILLAGE DRIVE 1.3 STREET ADDRESS STREET ADORESS MIAMI FL 33157 1.4 CITY-ST-ZIP COLY-SI-ZIF DELETE Change ☐ Addition TITLE 2.1 TOLE TD 2.2 NAME NAME EDWARD A. HAMMATT JR 7900 RED ROAD 2.3 STREET ADDRESS STREET ADDRESS DITY-ST-ZIP SOUTH MIAMI FL 33143 2. 4 City-St-ZiP DELETE Addition 3.1 TITLE TITLE **VPD** NAME MICHELLE DANG 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 17300 SW 84 CT. 3.4 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33157 DELETE Change Addition 4.1 TATLE TITLE BARBARA WIESINGER 4.2 NAME NAME 8962 RIDGELAND DR 4.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - 21F MIAMI FL 33157 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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, Fiorida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

52 NAME

61 TITLE 6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

THILE

NAME

STREET ADVINESS

STREET ADDRESS CHY-ST-20P

11

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

DOELETE

805 663-6660 Daytima Phone #

Change

Addition