

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002447

1. Entity Name

THE PET SHELTER, INC.

Principal Place of Business

25505 S.W. 182ND AVENUE
HOMESTEAD FL 33031

Mailing Address

25505 S.W. 182ND AVENUE
HOMESTEAD FL 33031

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

PROSEK, GAIL A
25505 S.W. 182 AV
HOMESTEAD FL 33031

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME PROSEK, GAIL
STREET ADDRESS 25505 S.W. 182ND AVENUE
CITY-ST-ZIP HOMESTEAD FL 33031

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE STD
NAME VILLA, DEBBIE
STREET ADDRESS 1660 B.W. 13TH AVENUE
CITY-ST-ZIP HOMESTEAD FL 33030

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME DAVIS, KATHY
STREET ADDRESS 15860 S.W. 280 STREET
CITY-ST-ZIP HOMESTEAD FL 33031

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME AQUINO, EDILBERTO DR.
STREET ADDRESS 15320 S.W. 58TH STREET
CITY-ST-ZIP MIAMI FL 33193

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME DEMILLY, TAD
STREET ADDRESS 2540 FAIRWAYS DRIVE
CITY-ST-ZIP HOMESTEAD FL 33035

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME HILL, JERRY
STREET ADDRESS 1660 SANDPIPER BLVD.
CITY-ST-ZIP HOMESTEAD FL 33035

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90113 027 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)

1-16-02 305-246-1936