

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0645707 AV

DOCUMENT #	P00000053753
1. Entity Name	YAPPY TAILS PET SERVICES, INC.



FILED  
04 JUL -7 PM 12:05

Principal Place of Business	Mailing Address
6410 99TH ST. E. BRADENTON FL 34202 US	6410 99TH ST. E. BRADENTON FL 34234 US

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number	65-1092636	Applied For	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LUPU, MARY P VP 6410 99TH ST. E. BRADENTON FL 34202		Name: <u>Lupi, Mary P. President</u> Street Address (P.O. Box Number is Not Acceptable): <u>6410 99th St. E.</u> City: <u>BRADENTON</u> FL Zip Code: <u>34202</u>	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Mary P. Lupi, President DATE: 6/23/04  
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PRES <input checked="" type="checkbox"/> Delete	TITLE	President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRAWFORD, LAURIE J PRES	NAME	Lupi, MARY P
STREET ADDRESS	5102 30TH ST. W.	STREET ADDRESS	6410 99th St E
CITY-ST-ZIP	BRADENTON FL 34207	CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	VP <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUPU, MARY P VP	NAME	
STREET ADDRESS	6410 99TH ST. E.	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34202	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary P. Lupi, President DATE: 6/20/04 DAYTIME PHONE #: 941-359-2999  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)