2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000018813

1. Entity Name
PETS "R" PEOPLE "2", INC.

Principal Place of Business	Mailing Address
6720 LOCKWOOD RIDGE ROAD SARASOTA, FL 34243	6720 LOCKWOOD RIDGE ROAD SARASOTA, FL 34243

DO NOT WRITE IN THIS SPACE

04112006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-1090101	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DONAHUE, PAULETTE
6720 LOCKWOOD RIDGE ROAD
SARASOTA, FL 34243

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

U00000545548
05/11/06-80080-009 150.00

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	DONAHUE, PAULETTE
STREET ADDRESS	6720 LOCKWOOD RIDGE ROAD
CITY-ST-ZIP	SARASOTA, FL 34243

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Paulette Donahue_ PAULETTE DONAHUE 4-10-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #