## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000062067

Entity Name: DOGGIEBLISS, INC

FILED May 05, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

256 S TESSIER DR 6020 9TH AVE S

SAINT PETERSBURG, FL 33706 GULFPORT, FL 33707

**Current Mailing Address: New Mailing Address:** 

256 S TESSIER DR 6020 9TH AVE S

SAINT PETERSBURG, FL 33706 GULFPORT, FL 33707

FEI Number: 65-1113229 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CIULLA, ANNA CIULLA, ANNA 6020 9TH AVE S 256 S TESSIER DR

SAINT PETERSBURG, FL 33706 US GULFPORT, FL 33707 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: ANNA CIULLA 05/05/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

CIULLA, ANNA Name: Name: CIULLA, ANNA 256 S TESSIER DR 6020 9TH AVE S Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33706 City-St-Zip: GULFPORT, FL 33707

Title: (X) Delete Title: () Change () Addition

Name: KIEBZAK, ELIZABETH Name: 256 S TESSIER DR Address: Address: SAINT PETERSBURG, FL 33706 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNA CIULLA 05/05/2005 D