

**2004 FOR YEAR FIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000112608

1. Entity Name
DOGSTORY NETWORK CO.



Principal Place of Business
3300 NORTH STATE RD.7, UNIT A-84
HOLLYWOOD, FL 33021-2168

Mailing Address
3300 NORTH STATE RD.7, UNIT A-84
HOLLYWOOD, FL 33021-2168



04282004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 90-0001213	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

RATTE, DANIEL
3300 NORTH STATE RD.7, UNIT A-84
HOLLYWOOD, FL 33021-2168

**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 *Daniel Ratte* **DANIEL RATTE** 04-26-04
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, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME RATTE, DANIEL
STREET ADDRESS 3300 N STATE ROAD 7 A84
CITY- ST- ZIP HOLLYWOOD, FL 330212168

TITLE S
NAME GAGNON, CHANTAL
STREET ADDRESS 3300 N STATE ROAD 7 A84
CITY- ST- ZIP HOLLYWOOD, FL 330212168

TITLE T
NAME PICARD, JO-ANN
STREET ADDRESS 187 WEST LAKE DRIVE
CITY- ST- ZIP PEMBROKE PINES, FL 33009

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000142201
04/30/04-80041-022 150.00

**DO NOT WRITE
IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel Ratte* **DANIEL RATTE** 04-26-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #