

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113776

FILED  
Apr 28, 2004  
Secretary of State

**Entity Name:** CLIP N'CARE PROFESSIONAL PET GROOMING SERVICE, INC.

**Current Principal Place of Business:**

30846 APAWAMIS DRIVE  
MOUNT PLYMOUTH, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

30846 APAWAMIS DRIVE  
MOUNT PLYMOUTH, FL 32776

**New Mailing Address:**

**FEI Number:** 02-0605082

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TORO, RUBEN D  
7345 SAND LAKE RD.  
204  
ORLANDO, FL 32819 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DP ( ) Delete  
**Name:** AGUIAR, VANESSA J  
**Address:** 1932 LAKE FOUNTAIN DR. APT. 615  
**City-St-Zip:** ORLANDO, FL 32839

**Title:** D ( ) Delete  
**Name:** CARDOSO, CARLOS  
**Address:** 1932 LAKE FOUNTAIN DR. APT. 615  
**City-St-Zip:** ORLANDO, FL 32839

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** DP (X) Change ( ) Addition  
**Name:** AGUIAR, VANESSA J  
**Address:** 30846 APAWAMIS DR.  
**City-St-Zip:** MOUNT PLYMOUTH, FL 32776

**Title:** D (X) Change ( ) Addition  
**Name:** CARDOSO, CARLOS  
**Address:** 30846 APAWAMIS DR.  
**City-St-Zip:** MOUNT PLYMOUTH, FL 32776

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 Statutes. 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:** VANESSA J AGUIAR

DP

04/28/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date