

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90023 013 ***150.00

DOCUMENT # P02000035803

1. Entity Name
RIO PET GROOMING CORPORATION



Principal Place of Business
**6536 COLLINS AVE
MIAMI, FL 33141**

Mailing Address
**6536 COLLINS AVE
MIAMI, FL 33141**

40008238



DO NOT WRITE IN THIS SPACE

01212005 No Chg-P CR2E034 (10/03)

4. FEI Number
74-3036803

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SPARKS, MARCIA
6536 COLLINS AVE
MIAMI BEACH, FL 33141**

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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

1 01/26/2005

**FILE NOW!!! FEE IS \$150.00
After May-1, 2005 Fee will be \$550.00**

9. Election Campaign Financing

Trust Fund Contribution: ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SPARKS, MARCIA
6536 COLLINS AVE
MIAMI, FL 33141**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 01/26/2005

Date

305 867 5152

Daytime Phone #