

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000049707

FILED
Apr 28, 2003
Secretary of State

Entity Name: PAWPRINTS PHOTO PET TREATS,INC

Current Principal Place of Business:

2000 SW 87 AVENUE
NORTH LAUDERDALE, FL 33068 US

New Principal Place of Business:

Current Mailing Address:

2000 SW 87 AVENUE
NORTH LAUDERDALE, FL 33068 US

New Mailing Address:

FEI Number: 82-0545582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAMSKY, ALEECE A
2000 SW 87TH AVENUE
NORTH LAUDERDALE, FL 33068 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Change (X) Addition
Name: ABRAMSKY, ALEECE A C
Address: 2000 SW 87 AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: M () Change (X) Addition
Name: GOLDMINTZ, MARTY M
Address: 2000 SW 87 AVENUE
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: ALEECE ABRAMSKY

C

04/28/2003

Electronic Signature of Signing Officer or Director

Date