

P02000057563

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PET SERVICES, INC
(Name of corporation)

DOCUMENT NUMBER: P02000057563

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN JACOBO RUIZ
(Name of person)

900006730629--1
-07/29/02--01078--003
*****35.00 *****35.00

(Name of firm/company)

900 W 49 ST. SUITE 524
(Address)

HIALEAH, FL. 33012
(City/state and zip code)

For further information concerning this matter, please call:

MARIA TERESA LAZARO at (305) 8232303
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(07/02)

RA/RO change
(10) 8/24/02

FILED
02 AUG 26 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

August 19, 2002

JUAN JACOBO RUIZ
900 W. 49 ST., STE 524
HIALEAH, FL 33012

SUBJECT: PET SERVICES, INC.
Ref. Number: P02000057563

We have received your document for PET SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You have failed to include the current registered agent and registered agent office address on the file with the Florida Department of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 302A00048755

RECEIVED
02 AUG 26 AM 11:18
DIVISION OF CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PET SERVICES, INC
2. The principal office address: 900 WEST 49 ST. SUITE 524
HIALEAH, FL. 33012
3. The mailing address (if different): THE SAME
4. Date of incorporation/qualification: 05/23/2002 Document number: P020000575463

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Joan Jacoso Ruiz
17650 NW 68th Ave #A3001
Hialeah, FL. 33012

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MARIA TERESA LAZARO

900 W 49 ST. SUITE 524, HIALEAH, FL. 33012

(P.O. Box or personal mailbox NOT acceptable)

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
02 AUG 26 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA