

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000120471

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: SUPPLIES FOR PETS, INC.

## Current Principal Place of Business:

3601 WEST COMMERCIAL BLV.  
SUITE 26  
FORT LAUDERDALE, FL 33309 US

## New Principal Place of Business:

3910 NW 49TH ST.  
TAMARAC, FL 33309 US

## Current Mailing Address:

3601 WEST COMMERCIAL BLVD.  
SUITE 26  
FORT LAUDERDALE, FL 33309 US

## New Mailing Address:

3910 NW 49TH ST.  
TAMARAC, FL 33309 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHWINN, JAMES M SR.  
5511 SW 7TH ST.  
PLANTATION, FL 33317 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: P ( ) Delete  
Name: SCHWINN, JAMES M SR.  
Address: 3601 WEST COMMERCIAL BLVD. SUITE 26  
City-St-Zip: PLANTATION, FL 33309 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHWINN, JAMES M SR.  
Address: 3910 NW 49TH ST.  
City-St-Zip: TAMARAC, FL 33309 US

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: JAMES M SCHWINN

PRES

04/30/2003

Electronic Signature of Signing Officer or Director

Date