2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 23, 2005 8:00 am Secretary of State **DOCUMENT # P03000013800** 1. Entity Name 05-23-2005 90002 011 ***150.00 WAG'N WHEELS MOBILE GROOMING, INC. Principal Place of Business Mailing Address 2825 NE 27TH STREET 2825 NE 27TH STREET LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL-33064 1473 NE 25th POMPANO BEACH FLA 33064 POMPANO BEACH 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01182005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For APPLIED FOR 75-3100478 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **DENHARD, CHRISTIAN** Street Address (P.O. Box Number is Not Acceptable) 2825 NE 27TH STREET LICHTHOUSE POINT, FL 33064 1473 NE 25 \$ ST POMPANO BEACH FLA 33064 City Zip Code 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIT1 F ☐ Delete TITLE Change . Addition DENHARD, CHRISTIAN CHEISTIAN DENHARD NAME 1473 NESSTEST 2825 NE 27TH STREET STREET ADDRESS STREET ADDRESS 1473 NE 25 45 + LIGHTHOUSE POINT, FL 99064 POMPAND BEACH FC CITY-ST-ZIP CITY-ST-ZIP DOMPANO BEALL, FLA ☐ Delete TITLE **E** Addition OFFICER ☐ Change NAME NAME JENNIFER DENHARD STREET ADDRESS STREET ADDRESS 1473 NE 25+505 T CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FC, 33069 TETLE ☐ Detete TITLE OFFICER Change Addition CASEY DENHALD NAME STREET ADDRESS STREET ADDRESS 1473 NE 25物 ST CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FLA 33064 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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 empowe

SIGNATURE: (

FILED