

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000062822

Entity Name: PRIMAPETS, INC.

FILED
Feb 19, 2004
Secretary of State

Current Principal Place of Business:

3500 GALT OCEAN DR. NO. 317
FT. LAUDERDALE, FL 33308

New Principal Place of Business:

3500 GALT OCEAN DRIVE
NO. 317
FT. LAUDERDALE, FL 33308

Current Mailing Address:

3500 GALT OCEAN DR. NO. 317
FT. LAUDERDALE, FL 33308

New Mailing Address:

3500 GALT OCEAN DRIVE
NO. 317
FT. LAUDERDALE, FL 33308

FEI Number: 75-3119691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAM, LAURIE
19111 COLLINS AVE STE 2001
SUNNY ISLES, FL 33160 US

Name and Address of New Registered Agent:

GAM, LAURIE
3500 GALT OCEAN DRIVE
NO. 317
FT. LAUDERDALE, FL 33308 US

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:

02/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GAM, LAURIE
Address: 19111 COLLINS AVE STE 2001
City-St-Zip: SUNNY ISLES, FL 33160

Title: DV () Delete
Name: RABINOWITZ, MARCIA
Address: 1550 NE QUAYSIDE TERR 2001
City-St-Zip: MIAMI, FL 33138

Title: DST () Delete
Name: DAMHUIS, IRMA J
Address: 6 VILLAGE LN
City-St-Zip: BRONXVILLE, NY 10708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GAM, LAURIE
Address: 3500 GALT OCEAN DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: DAMHUIS, IRMA J
Address: 146 PONDFIELD ROAD WEST
City-St-Zip: BRONXVILLE, NY 10708

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: LAURIE GAM

PRES

02/19/2004

Electronic Signature of Signing Officer or Director

Date