


2005 FOR PROFIT CORPORATION ANNUAL REPORT

1002

DOCUMENT # P04000120814		
1. Entity Name MUFFY MONROE, INC.		

FILED

05 OCT 11 AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 555 JEFFERSON DR SUITE 103 DEERFIELD BEACH, FL 33442	Mailing Address 555 JEFFERSON DR SUITE 103 DEERFIELD BEACH, FL 33442
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

09132005 Chg-P CR2E034 (10/03)

4. FEI Number 01-0819991	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when translating)	DATE
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FILE NOW!!! FEE IS \$550.00 Due by October 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ROBINSON, CYNTHIA H 555 JEFFERSON DR SUITE 103 DEERFIELD BEACH, FL 33442 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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10/11/05--01047--014 **150.00

[Handwritten Signature]
9/10/05

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 empowered.

SIGNATURE: <i>Cynthia H Robinson</i>	9/15/05	954-419-9901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

FOUR ON THE FLOOR PETWEAR

Muffy Monroe, Inc.

Cindy Robinson

555 Jefferson Drive #103

Deerfield Beach, FL 33442

Phone 888-459-9327 / Fax 954-419-9902

<http://www.FourOnTheFloorPetwear.com>

E-mail : fourfloor@aol.com

October, 6 2005

Some time in August or September I received Document #P04000120814 for the first time. I filled the document out and returned it. On September 27th I received the document back stating that it was incomplete.

Upon calling your office to find out what was incomplete about the document I was told that the document was in fact complete but I had failed to enclose a check.

I am returning the completed document to you with the enclosed check.

I apologize for the misunderstanding.

Sincerely,
Cindy Robinson