

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000008938

Entity Name: PET WELLNESS, INC.

FILED
Mar 28, 2007
Secretary of State

Current Principal Place of Business:

2801 EAST COMMERCIAL BOULEVARD
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

2881 E. OAKLAND PARK BLVD.
417
FORT LAUDERDALE, FL 33306

Current Mailing Address:

2801 EAST COMMERCIAL BOULEVARD
FORT LAUDERDALE, FL 33308

New Mailing Address:

2881 E. OAKLAND PARK BLVD.
417
FORT LAUDERDALE, FL 33306

FEI Number: 20-2272635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, ARCH DR.
2801 EAST COMMERCIAL BOULEVARD
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

WILSON, CHARLES C
2881 E. OAKLAND PARK BLVD.
417
FORT LAUDERDALE, FL 33306 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: CHARLES C. WILSON

03/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GORDON, ARCH DR.
Address: 2801 EAST COMMERCIAL BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILSON, DEE A MS.
Address: 2881 E. OAKLAND PARK BLVD., SUITE 417
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: VP () Change (X) Addition
Name: WILSON, CHARLES C MR.
Address: 2881 E. OAKLAND PARK BLVD., SUITE 417
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: SECY () Change (X) Addition
Name: WILSON, DEE A MS.
Address: 2881 E. OAKLAND PARK BLVD., SUITE 417
City-St-Zip: FORT LAUDERDALE, FL 33306

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CHARLES C. WILSON

VP

03/28/2007

Electronic Signature of Signing Officer or Director

Date