2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 8:00 am Secretary of State

3-20-07

Davime Frione #

DOCUMENT # P0500056372 1. Entity Name FLORIDA PET SERVICES CORPORATION					04-23-2007 90076 005 ***150.00				
Principal Place 3321 NW 35 MIAMI, FL 33	TH STREET	Mailing Address 3321 NW 35TH STREET MIAMI, FL 33142 US				,	~ €		
2. Principal P 302 Suite, Apt.	lace of Business - No P.O. Box # DW 186 Crael #, etc.	3. Mailing Address 3021 NW 18 Suite, Apt. #, etc.	b Terra	ee	03202007	Chg-P	CR2E034 ((68)# 	
Gity & State	F1	City & State			4. FEI Numb				olied For Applicable
Zip 330 S	Country	33056	Country USA			of Status Desired	Fee	.75 Addit Required	tional
,	6. Name and Address of Current R UILLERMO 71 PLACE	Name Of Street Ad	7. Name and Address of New Registered Agent Name Ofe 2. Outlarns Street Address (P.O. Box Number is Not Acceptable)						
HIALEAH, FL 33014				NA	186	Terrace	FL 4	Zip Code 33<i>0</i> 1 7	
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 tille if applicable. (IAD'T Registered Agent signature required when registering) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					00 May Bo ed to Fees				
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS	CHANGES TO OFFIC	CERS AND DIF	RECTORS	IN 11
NAME STREET ADDRESS CITY-S1-ZIP	PVST LOPEZ, GUILLERMO 3321 NW 35TH STREET MIAMI, FL 33142	Delete	HTLE NAME STREET ADORESS CITY-ST-ZIP	PUS 30:	مقر هيا	112-mo 186 Ter	•	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, GUILLERMO 3321 NW 35TH STREET MIAMI, FL 33142	S Delete	TITLE NAME STREET ADDRESS CITY-ST-21P				<u> </u>	Change	Addition
TITLE NAME STREET ADURESS CITY ST ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TIILE NAME STREET ADDRESS CITY-SI-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Detete	TIFLE NAME STREET ADDRESS CITY ST ZIP					Change	☐ Addition
NAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY S1-ZIP					Change	Addition
12. I hereby certily that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver or trustee expowered 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.									