

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000116301

**FILED**  
**Jan 29, 2008**  
**Secretary of State**

**Entity Name:** PET RESORT KENNELS AND SPA, INC.

**Current Principal Place of Business:**

5080 INDUSTRY DRIVE  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

5080 INDUSTRY DRIVE  
MELBOURNE, FL 32940 US

**New Mailing Address:**

**FEI Number:** 20-3682885      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEFEVERS, HOWARD  
5080 INDUSTRY DRIVE  
MELBOURNE, FL 32940 US

**Name and Address of New Registered Agent:**

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:** HOWARD LEFEVERS

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P      ( ) Delete  
**Name:** LEFEVERS, HOWARD  
**Address:** 5080 INDUSTRY DRIVE  
**City-St-Zip:** MELBOURNE, FL 32940 US

**Title:** S      ( ) Delete  
**Name:** PLATZ, ROBERT  
**Address:** 5080 INDUSTRY DRIVE  
**City-St-Zip:** MELBOURNE, FL 32940 US

**Title:** T      ( ) Delete  
**Name:** PLATZ, MILLIE  
**Address:** 5080 INDUSTRY DRIVE  
**City-St-Zip:** MELBOURNE, FL 32940 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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:** HOWARD LEFEVERS

Electronic Signature of Signing Officer or Director

PRES

01/29/2008

Date