## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000116793

Entity Name: GROOMINGDALES OF PALM BEACH PET SPA, INC

FILED Apr 30, 2009 Secretary of State

Elluty Nai	ile: GROOI	VIINGDALES OF	· PALIVI DEACH	PET SPA, INC				
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
	ILITARY TR. CH GARDE	AIL #112 :NS, FL 33418						
Current Mailing Address:				New Maili	New Mailing Address:			
	ILITARY TR. CH GARDE	AIL #112 :NS, FL 33418						
FEI Number:	54-2180565	FEI Number A	Applied For ( )	FEI Number Not App	licable()	Certificate of Status	Desired ( )	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
4590 PGA	IN, TRISHA BLVD STE 1 CH GARDE	108 INS, FL 33410	US					
	named entit of Florida.	y submits this st	atement for the p	ourpose of changing i	ts registered	l office or registered	agent, or both,	
SIGNATUF	RE:							
	Electr	onic Signature o	f Registered Age	ent		Date		
Election Can	npaign Financ	ing Trust Fund Co	ntribution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name:	D LAINFIESTA,	( ) Delete , ROBERT		Title: Name:	D LAINFIESTA,	(X) Change ( ) Addition ROBERT		

10800 N MILITARY TRAIL #112 Address: 3843 BLUEBELL ST Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410 () Delete Title: (X) Change ( ) Addition LAINFIESTA, DAHIANA V LAINFIESTA, DAHIANA V Name: Name: Address: 3843 BLUEBELL ST Address: 10800 N MILITARY TRAIL #112 PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410 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: ROBERT LAINFIESTA D 04/30/2009