2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122723

City-St-Zip:

MERRITT ISLAND, FL 32952 US

Entity Name: 4 YOUR PET'S SAKE, INC.

FILED Apr 15, 2008 Secretary of State

| • | | ,, | | | |
|---|--|--|---|--|--|
| Current Principal Place of Business: | | | New Principal | New Principal Place of Business: | |
| 6953 NAS/ WEST ME | A BLVD :LBOURNE, FL | 32904 US | | TROPICAL TRAIL AND, FL 32952 US | |
| Current M | lailing Addres | s: | New Mailing A | Address: | |
| PO BOX 4 MELBOUR | 10971 RNE, FL 32941 | US | | TROPICAL TRAIL AND, FL 32952 US | |
| FEI Number: | : 20-3434042 | FEI Number Applied F | or () FEI Number Not Applicable | ole () Certificate of Status Desired () | |
| Name and | Address of C | urrent Registered A | gent: Name and Ad | dress of New Registered Agent: | |
| | SE M TH TROPICAL ISLAND, FL 32 | | | | |
| | named entity s e of Florida. | ubmits this statemen | t for the purpose of changing its re | egistered office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electroni | ic Signature of Regis | tered Agent | Date | |
| Election Car | mpaign Financing | Trust Fund Contributio | n (). | | |
| OFFICER | S AND DIRECT | rors: | ADDITIONS/C | CHANGES TO OFFICERS AND DIRECTOR | |
| Title: Name: Address: City-St-Zip: | RUIZ, ROSE M 6215 SOUTH TR | Delete ROPICAL TRAIL ND, FL 32952 US | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | RUIZ, ENRIQUE 6215 SOUTH TR | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | SECR () RUIZ, ROSE M 6215 SOUTH TR | Delete | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: ROSE M RUIZ P 04/15/2008