


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90069 012 ***150.00

DOCUMENT # P05000144793 1. Entity Name A VERY IMPORTANT PET INC.	
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Principal Place of Business 1242 CLEVELAND STREET CLEARWATER, FL 33755	Mailing Address 1242 CLEVELAND STREET CLEARWATER, FL 33755
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DO NOT WRITE IN THIS SPACE



02212008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3720212	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROTH, JAYCEE
1242 CLEVELAND STREET
CLEARWATER, FL 34655

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ROTH, JAYCEE 300 DUNCAN LOOP EAST BLDG. 27 APT 102 CLEARWATER, FL 34698
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HIET, RICHARD 2200 CLEVELAND STREET CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MORRIS, ANTHONY 1242 CLEVELAND STREET CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ROTH, JAYCEE 1242 CLEVELAND STREET CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/08 727-446-6700
Date Daytime Phone #