

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110142

Entity Name: LE PETITE PUPPIES, INC.

FILED  
May 29, 2007  
Secretary of State

## Current Principal Place of Business:

933 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

## Current Mailing Address:

933 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 US

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAM I. SKOLNIK, P.A.  
323 NORTHEAST SIXTH AVENUE  
DELRAY BEACH, FL 33483 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VIEIRA, PATRICIA E  
Address: 13790 SW 56TH STREET, SUITE B  
City-St-Zip: MIAMI, FL 33175 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VIEIRA, PATRICIA E  
Address: 933 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: PATRICIA VIEIRA

PRES

05/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date