

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

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| DOCUMENT # P06000144210 | |
| 1. Entity Name LIDIA'S TOUCH, CUSTOM PROFESSIONAL PET GROOMING INC | |
| Principal Place of Business 2634 ROSEHAVEN DRIVE WESLEY CHAPEL, FL 33543 US | Mailing Address 2634 ROSEHAVEN DRIVE WESLEY CHAPEL, FL 33543 US |



04062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|-------------------------------|
| 4. FEI Number 20-5895640 | 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

**ARMSTRONG, KEVIN D
2634 ROSEHAVEN DRIVE
WESLEY CHAPEL, FL 33543**

**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

Signature, typed or printed name of registered agent and title if applicable.

(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.

☐ **\$5.00 May Be
Added to Fees**

UD00000899299
04/28/08-80033-018 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SANTANA-ARMSTRONG, LIDIA M 2634 ROSEHAVEN DRIVE WESLEY CHAPEL, FL 33543 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP ARMSTRONG, KEVIN D 2634 ROSEHAVEN DRIVE WESLEY CHAPEL, FL 33543 |
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**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:

Kevin D Armstrong
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13Apr2008
Date

813-907-1850
Daytime Phone #