

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000011916

FILED  
Apr 23, 2012  
Secretary of State

Entity Name: VIVAPETS NORTH AMERICA, INC.

**Current Principal Place of Business:**

410 SOUTH WARE BOULEVARD  
SUITE 1037  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

410 SOUTH WARE BOULEVARD  
SUITE 1037  
TAMPA, FL 33619

**New Mailing Address:**

FEI Number: 27-1857060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ATTORNEY SOLUTIONS LLC  
4000 PONCE DE LEON BOULEVARD  
SUITE 470  
CORAL GABLES, FL 33146 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MANDT, A.J. M  
Address: 410 SOUTH WARE BOULEVARD #1037  
City-St-Zip: TAMPA, FL 33619

Title: DVS  
Name: MANDT, JUDITH M  
Address: 410 SOUTH WARE BOULEVARD #1037  
City-St-Zip: TAMPA, FL 33619

Title: VS  
Name: MANDT, RICHARD D  
Address: 410 SOUTH WARE BOULEVARD #1037  
City-St-Zip: TAMPA, FL 33619

I hereby 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 all other like empowered.

SIGNATURE: A.J.M. MANDT

DP

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date