

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000098851

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Entity Name:** ALL ANIMAL SERVICES INC.

**Current Principal Place of Business:**

13160 SLEEPY HOLLOW LANE  
FT. MYERS, FL 33913

**New Principal Place of Business:**

17971 CYPRESS CREEK ROAD  
ALVA,, FL 33920

**Current Mailing Address:**

13160 SLEEPY HOLLOW LANE  
FT. MYERS, FL 33913 US

**New Mailing Address:**

P.O. BOX 564  
ALVA,, FL 33920 US

**FEI Number:** 04-3780303

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAMILTON, DIANE L  
13160 SLEEPY HOLLOW LANE  
FT. MYERS, FL 33913 US

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

HAMILTON, DIANE L  
17971 CYPRESS CREEK ROAD  
ALVA, FL 33920 US

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: DIANE L. HAMILTON

04/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HAMILTON, DIANE L  
Address: 17971 CYPRESS CREEK ROAD  
City-St-Zip: ALVA, FL 33920

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: DIANE L. HAMILTON

PRES

04/17/2012

Electronic Signature of Signing Officer or Director

Date