## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P93000060555 (8) DOCUMENT # 1. Corporation Name

C&M GROOMING, INC.

Principal Place of Business Mailing Address  310 E WATERS AVE TAMPA FL 33604 TAMPA FL 33604									
Principal Place of Business     2a Mailro Address						3. Date Incorporated or Qualified 3a. 08/25/1993		Date of Last Report 04/26/1995	
2. Fancipal P	race of Business	2a. Mailing Addre	ss			4. FEI Number		Applied For	
Suite, Apt.	#, etc	26 Suite, Apt. #,				59-3238758		Not Applicable	
22		27	eic.			5. Certificate of Status Desired		3.75 Additional	
City & Stat	e	City & State				\$ Flants 0		Fee Required	
23		28				Election Campaign Financing     Trust Fund Contribution		5.00 May Be	
Žφ	Country	Zip		Country		8. This corporation has liability for int		idded to Fees	
24	25	29	30	l		Fiorida Statutes 🔲 Yes	□No		
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	stered Agen	l	
TUOLIDA	PON JEANINETTE			81	Name			·	
ATOMPS	SON, JEANNETTE			82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
310 E WATERS AVE TAMPA FL 33604									
IAMEAI	rt. 33004			83					
				84	City	74	85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607 1600 Clasida	C4-3-4	ll					
or register	red agent, or both, in the State of Florid	da. Such change was a	statutes, the athorized by	e above ri the corpo	amed corpor. Tation's boar	ration submits this statement for the purpord of directors. Thereby accept the appoin	ise of changing	its registered office	
	th, and accept the obligations of, Sect	tion 607.0505, Florida S	atutes.			a to a social of the expoint	men: as regist	ered agent Tam	
SIGNATURE .	Signature, typed or printed name of registered agent	and the Land web				Twiter removateg			
12.	OFFICERS AND			13.	Signal (fores), res		F/ATE		
TIFLE	PSTD	☐ DELET		1 1 DTLF	·	ADDITIONS/CHANGES TO OFFICE			
NAME	THOMPSON, JEANNETTE		ľ	1.2 NAME			[_] Char	ige 🔲 Addition	
STREE1 ADDRESS	310 E WATERS AVE			1.3 STREEL A	ADDRESS				
CITY-ST-ZIP	TAMPA FL 33604		1	1.4 CIFY - \$1					
THTLE	VD	[] DELET		2 1 THTLE			☐ Chan	ge Addition	
NAME	MAGYAR, CECILIA		ŀ	2.2 NAME				ge [_] Addition	
STREET ADDRESS	310 E WATERS AVE			2 3 STREET A	DDRESS				
CITY - ST - ZIP	TAMPA FL 33604			2 4 CITY - ST	ZIP				
TITLE		DELET		3 1 TITLE	·		☐ Chan	ge 🗍 Addition	
NAME OTREST LEGGES			<b>.</b>	3.2 NAME	}			- 5	
STREET ADDRESS			] ;	33 STREET A	ADDRESS				
CITY-ST-ZIF TITLE				3 4 CITY - ST	200				
NAME		DELETE	<b>1</b>	4 1 TiTLE			☐ Chan	ge Addition	
STREET ADDRESS			4	4 2 NAME				_	
			4	4.3 STREET A	DDRESS				
CITY-ST-ZIP TITLE				4 4 CITY - S1 -	ZIF				
NAME		DELETE	1	5 1 TITLE			☐ Chang	je 🔲 Addition	
STREET ADDRESS			<b>.</b> .	5.2 NAME					
			5	5 3 STREET AL	DDRESS			ľ	
CITY-ST-ZIP			5	54 CITY-SI	!				
CITY-ST-ZIP TITLE		☐ D€LETE	5	6 4 CITY-SI-	!		Cnang	e Addition	
CITY - ST - ZIP TITLE NAME		[] DELETE	5 6	54 CITY-SI- 6-1 TITLE 62 NAME	ZIP		☐ Criang	e Addition	
CITY-ST-ZIP		☐ Délete	5 6 6	6 4 CITY-SI-	ZIP DDRESS		☐ Crianç	e Addition	

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: