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

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Stale

DIVISION OF CORPORATIONS

<b>DOCUMENT</b> #	ŧ
<ol> <li>Corporation Name</li> </ol>	

P93000065181 (8)

PET LIFE, INC.

Principal Place of Business

2068 N. 1	MILITARY TR.	
SUITE B	N M REACH FI	00100

2088 N. MILITARY TR.

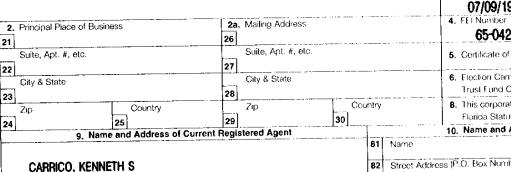
WEST PALM BEACH FL 33409

SUITE B

Mailing Address

2088 N. MILITARY TR. SUITE B

WEST PALM BE



3. Date Incorporated or Qualified 07/09/1993	3a. Date of Last Report 07/03/1995
4. FEI Number	Applied For
65-0421111	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
Flection Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for i	intangible tax under s. 199.032,
1101100101111100	□No
10. Name and Address of New F	tegistered Agent
ess (P.O. Box Number is Not Acceptat	ole)
	FL 85 Zip Code
	07/09/1993 4. FEI Number 65-0421111 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for Florida Statutes Yes 10. Name and Address of New F

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am

12.	ilynature ityped or printed name of registered agent and title it applicable. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1. 1 TITLE	Change Addition
NAME	CARRICO, KENNETH S	1.2 NAME	
STREET ADDRESS	2088 N. MILITARY TR., STE. B	1.3 STREET ACCRESS	
CITY-ST-ZIP	W. PALM BEACH FL 33409	1.4 CITY+\$1-ZIP	Change Addition
TITLE	☐ DELETE	2 1 TITLE	Change Addition
NAME		2 2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2 4 CITY-ST-ZIP	Change Addition
TITLE	DELETE	3 1 THLE	E change E Auditori
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3 4 CHTY-ST-ZIP	Change Addition
TOLE	☐ DELETE	4. 1 TBLE	C Orionge C Account
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST- 7IP	Change Addition
TITLE	DETEIE	5 1 TITL <del>t</del>	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CiTY-ST-ZIP		5 4 CHY - \$1 - 7 P	Change Addition
TITLE	DELETE	6 1 TITLE	
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
0.7V CT 7.0		6.4 CITY - S1 - 7 IP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplement annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of pristee 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 attackment with an address.

SIGNATURE:

March 19-96 407 684-8499