ANNUAL KEPUKI

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000071563

1. Entity Name

INTERNATIONAL VETS, INC.



FILED Mar 24, 2004 08:00 AM Secretary of State

Principal Place of Business 25 WEST MAYER PLACE FLAGLER BEACH, FL 32136 Mailing Address

25 WEST MAYER PLACE FLAGLER BEACH, FL 32136



03202004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3214853 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUNTHARP, PAUL M 185 CYPRESS POINT PKWY STE 6 SUITE B PALM COAST, FL 32137

DO NOT WRITE IN THIS SPACE

<u> </u>					in the second se	· . ·	
	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	d office or reg	istered agent, or bo	th, in the State of Florida	. I am familiar with, ar	nd accept
SIGNATURE_ Signature, typed or printed name of registered agont and the fl applicable. (NOTE: Registered			Agent signature re	gent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000095	502 36-004-150-0	
10.	OFFICERS AND DIREC	CTORS			HOTE IT HIT , HULL	on on the transfer	A company
TITLE NAME STREET ADDRESS CITY: ST: ZIP	P CAMERON, CHARLES M JR. 25 WEST MAYER PLACE FLAGLER BEACH, FL 32136						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CAMERON, G. FAYE 25 WEST MAYER PLACE FLAGLER BEACH, FL 32136				Total		
TITLE NAME STREET ADDRESS CITY- ST-ZIP				DO	NOT WE	ITE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				IN '	THIS SPA	CE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. Thereby	certify that the information supplied with this fi	ling does not qualify for the exen	nplion stated i	n Section 119,07(3)	(i), Florida Statutes. I lur	her certify that the info	ırmation

2. The expression is a marrial applied with this mind does not quality of the exemption stated in Section 193.07(3)(), Profide Statutes, 1 turner 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 507, 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.

CICNATURE. Quile A. Camera f. Prosiosur 20 Marcer 2004