FROM : PHONE NO. :

FILED
Jun 06, 2000 8:00 am
Secretary of State
06-06-2000 90485 004 ***150.00

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000038961

1. Entity Name

PUPPY KINGDOM KENNEL,INC.

Principal Place of Business: 2700 SW 27 Ave, MIAMI FL 33133

Mailing Address: 2700 SW 27 Ave, MiamiFL 33133

2. Principal Place of Business — Suite, Apt # etc. — City & State — Zip — Country

3. Mailing Address — Suite, Apt # etc. — City & State — Zip — Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0585962 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PUBCHARA,JORGE
2700 S.W 27 Ave
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City — FL — Zip Code

8. 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 ______ DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS X

Title	Name / Street Address / City-St-Zip	Delete
DP	PUBCHARA,FRANK J 10381 S.W 37 TERRACE MIAMI FL	☒ Delete
P	PUBCHARA,JORCER 14816 SW 74 LANE MIAMI FL 33193	☐ Delete
SVD	PUBCHARA,JORGE JR 3040 SW 130 Ave MIAMI FL	☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with all other like empowered.

SIGNATURE: [signature] 4-28-00 Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #