

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000052993

1. Entity Name

DOGIPOT, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90206 035 ***150.00

Principal Place of Business

Mailing Address

14522 QUAIL TRAIL CIRCLE
ORLANDO FL 32837
US

P.O. BOX 618305
ORLANDO FL 32877-0759
US

855510



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1282 Lg Quinck Drive

P.O. Box 770759

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#5

City & State

City & State

Orlando, FL

Orlando, FL

4. FEI Number

59-3258740

Applied For

Not Applicable

Zip

Country

Zip

Country

32809

Orange

32877-0759

Orange

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETERSON, JUERG G.
14522 QUAIL TRAIL CIRCLE
ORLANDO FL 32837

Name

Petersen Juerg

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

106 Burrell Circle

City

Hissimmee

FL

34744

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

[Signature]

Juerg Petersen, President

4/10/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME PETERSEN, JUERG G.
STREET ADDRESS 14522 QUAIL TRAIL CIRCLE
CITY-ST-ZIP ORLANDO FL

TITLE ☒ Change ☐ Addition
NAME Petersen Juerg G.
STREET ADDRESS 106 Burrell Circle
CITY-ST-ZIP Hissimmee, FL 34744

TITLE V ☐ Delete
NAME PETERSEN, HAYA R
STREET ADDRESS 14522 QUAIL TR CIR
CITY-ST-ZIP ORLANDO FL 32837

TITLE ☒ Change ☐ Addition
NAME Petersen Haya R
STREET ADDRESS 106 Burrell Circle
CITY-ST-ZIP Hissimmee FL 34744

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 an address, with an other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00

Date

(407) 344-4529

Daytime Phone #

CR2E034 (9/99)