## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P95000036273 (7) **DOCUMENT #** GROOMING STATION, INC. Principal Place of Business Mailing Address 1836 MARINA CIRCLE 1836 MARINA CIRCLE FT. MYERS FL 33903 FT. MYERS FL 33903 Date Incorporated or Qualified 05/09/1995 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address 21 15271 McGREGOR PLVD Applied For 26 Not Applicable Sulte. Apt. #, etc. 19 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes Country 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 82 343 ALMERIA AVENUE CORAL GABLES FL 33134 84 CHNORTH FORT MYERS 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. LINO TONI A. (NOTE: Registered Adunt signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. (12/95) OFFICERS AND DIFFECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THEE DELETE 1.1 TITLE Change Addition LINO, TONI A NAME LINO, 1.2 NAME 1836 MARINA CIRCLE SHELBY-LANE STREET ADDRESS 1.3 STREET ADDRESS FT. MYERS FL 33903 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2. 1 TITLE Change Addition NAME 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - \$1 - ZIP 2.4 CITY-S1-ZIP TITLE ■ DELETE 3 1 TITLE Change Addition NAME 32 NAME STHEET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP THILE DELETE 5. 1 TITLE Change ☐ Addition NAME 52 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 54 CHY-ST-ZIP THILE □ DELETE 6. 1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Ido 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), Fiorida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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.

LINO, TONI A. 03/09/96 941/567-126