FILE NOW FILING FEE AFTER MAY 1ST IS \$550.00

May 15, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE CORPORATION... Katherine Harris ANNUAL REPORT 05-15-1999 90011 027 ***150.00 Secretary of State 1999 DIVISION OF CORPORATIONS **DOCUMENT #** P95000069240 1. Corporation Name 551360 - 90011 - 27 Animal Lovers Center, Inc. Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE 8454 S.W. 24th St. 8454 S.W. 24th St. 3. Date Incorporated or Qualified Miami, FL 33155 Miami, FL 33155 2a. Mailing Address 09/08/95 Applied For 2. Principal Place of Business 4. FEI Number 65-0611643 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 8. This corporation owes the current year Intangible Personal Zip Country Zip Country XNo Property Tax. Yes 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Hurtado, Xiomara 3901 S.W. 78th Ct., Apt 21 84 City 85 Zip Code Miami, FL 33155 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 appointmen as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Addition D/P DE ETE Change 1.1 TITLE TITLE Hurtado, Xiomara 3901 S.W. 78th Ct., Apt 21 Miami, FL 33155 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP CITY-ST-ZIF DBLETE Addition D/S/T 21 TITLE TTR F Hurtado, Miguel 3901 S.W. 78th Ct., Apt 22 NAME NAME 21 STREET ADDRESS 23 STREET ADDRES Miami, FL 33155 24 CITY-ST-ZIP CITY-ST-ZIP DBLETE 31 TITLE Change Addition TIRE NAME 3.2 NAME 3.3 STREET ADDRES STREET ACCORESS 3.4 OTY-ST-ZIP CITY-ST-ZIP . Addition TITLE - DBLETE 41-TITLE 42 NAME NAME 43 STREET ADDRESS STREET ACCRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DBLETE Change Addition TILE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Charge Addition DBLETE 6.1 TITLE TITLE 6.2 NAME NAME

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 64 CITY-ST-ZIP

Xiomara Hurtado PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 223-7721

STREET ADDRESS

CITY-ST-ZIP