

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

FILED
Jul 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000010098 (7)

1. Corporation Name

PETMED EXPRESS, INC. ✓

Principal Place of Business

3330 N.W. 53 STREET, #307
FT. LAUDERDALE FL 33309

Mailing Address

3330 N.W. 53 STREET, #307
FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1996

4. FEI Number

65-0637183 65-0680967

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 3350 NW 53 ST

Suite, Apt. #, etc.

22 SUITE #103

City & State

23 FT. LAUDERDALE, FL

Zip

24 33309

Country

25 U.S.A.

2a. Mailing Address

26 3350 N.W. 53 ST

Suite, Apt. #, etc.

27 SUITE #103

City & State

28 FT. LAUDERDALE, FL.

Zip

29 33309

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

PULEO, MARC MD
3330 N.W. 53 STREET, #307
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D PULEO, MARC A
3330 N.W. 53 STREET, #307
FT. LAUDERDALE FL 33309

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PST PULEO, MARK A
3330 N.W. 53 STREET, #307
FT. LAUDERDALE FL 33309

☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

D PULEO, MARC A.
3350 NW 53 ST / 103
FT. LAUDERDALE FL 33309

☒ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

PST PULEO, MARC A.
3350 NW 53 ST / 103
FT. LAUDERDALE, FL 33309

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

700002603287
--07/31/98--01001--017
***150.00

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

SIGNATURE

CR2E034 (10/97)