2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 27, 2005 8:00 am Secretary of State

DOCU! 1. Entity Name DOGBAS		<u>!</u> 994			05-05-200	5 90083 025 **	**150.00	
Principal Place of Business 2 KYLE WAY BOYNTON BEACH, FL 33426		Mailing Address 6542 HYPOLUXO RD LAKE WORTH, FL 33467		COULUIOU				
2. Principal Pl	ace of Business	3. Mailing Address	UKA RIO					
Suite, Apt. #, etc.		Suite Apt. 8, etc. # 325		05022005	Chg-P	CR2E034 (10/0)	3)	
City & State		LAKE WORTH , FL		4. FEI Numb		J+	Applied For Not Applicable	
Zip	Country	Zlp	Country BEA	5. Certificate	of Status Desired	□ \$8.75 A		
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
EBERLE, F	FREDERICK C AY		Street Address	(P.O. Box Numb	er is Not Acceptable)		
BOYNTON	BEACH, FL 33462							
			City		······	FL Zip C	ode	
	named entity submits this statement for ions of registered agent.	и the purpose of changing its r	registered office or regist	tered agent, or bo	xh, in the State of Fic	orida. I am familiar wi	th, and accept	
•	· •							
SIGNATURE_	Signature, typed or printed name of regimened agons	end title # applicable. (NOTE:	Registered Agains argnitisms requi	red when remaking)	······································	OATE		
	LE NOWIII FEE IS \$150.00 ue by September 7, 2005	Election Campaig Trust Fund Contri		5.00 May Be	In accordance v corporation did	with s. 607.193(2)(t not receive the pric), F.S., the or notice.	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO OFF	ICERS AND DIRECTO	RS IN 11	
TITLE HAME STREET ADDRESS CITY-SI-ZIP	D EBERLE, FREDERICK C 2KYLE WAY BOYNTON BEACH, FL 33482	☐ Delicie	TITLE NAME STREET ADDRESS CITY-ST-ZP			☐ Chang	e Addition	
BRE		☐ Deleta	TITLE	···		☐ Chang	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP					
TIPLE		☐ Deleta	TITLE			☐ Chano	e 🔲 Addition	
STREET ADDRESS CITY+ST-ZP		_	NAME STREET ADDRESS CITY-ST-ZP			_ •		
nae		Delete	nre.			Chang	a Addition	
STREET ADDRESS		, 	NAME STREET ADDRESS CITY-ST-ZP					
COTY-ST-ZEP		Пан	TITLE	·-·	F	☐ Chang	e 🔲 Addition	
HAME STRET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP				,	
TITLE NAME STREET ADDRESS UITY-ST-ZIP		☐ Defete	TITLE STREET ADDRESS CTY-ST-ZP		<u> </u>	Chang	e 🔲 Addition	
Indicated of the co	certify that the information supplied wit ton this report or supplemental report poration or the receiver or trustee emp , or on an attachy of the with an address.	is true and accurate and that movered to execute this report (ry signature shall have th as required by Chapter 6	se came lenai elle	ct as it made under (oath: that I am an offic	er of director	

SIGNATURE: TANGEN MALL FREDERICK EBERLE 6/20/05