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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 08 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000065634 (3)

14. Thereby certify that the information supplied with this filing does indicated on this annual report of surpliemental annual report of officer or director of the corporation or the receiver or trusted on Block 12 or Block 13 if changed, or on an aradichinem with all

PUPPY HOLDINGS INC.

Principal Plac	ce of Business	Mailing Address				
800 PALM A	VENUE	600 PALM AVENUE				
SUITE A HALEAH FL 33010		SUITE A		DO NOT WE	DO NOT WRITE IN THIS SPACE	
HIALEAN FL	33010	HIALEAH FL 33010		3. Date Incorporated or Qualific		
				08/06/1996		
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0684112	Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			SR 75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Sta	te	City & State		6. Election Campaign Financin	g \$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zφ	Country	8. This corporation owes or has	s paid the current year Intangible	
24	25	29	30	Personal Property Tax due J		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New	Registered Agent	
	ACHAELO, LUIS		81 Na	MEANTONIO GESTIDO	ir.	
	00 PALM AVE.		82 Str	reet Address (P.O. Box Number is Not Acce GOO PALM AV. ##	ptable)	
	JITE A			<u>600 PALM AV. #78</u>	<u> </u>	
<u> </u>	ALEAH FL 33019	2	83			
	. /	/ _	<b>84</b> Cit	V ALAL MALL	85 Zip Code	
-		<i>′</i>		MIALEAH	FL 33010	
11. Pursuant office or	to the provisions of Sections 607/0502 registered agent of both, in the lital to	and 607.1508, Florida Statu Migrida: Sylch change was	ites, the above-hai authorized by the	med corporation submits this statement for the corporation's board of directors. I hereby as	ne purpose of changing its registered   ccept the appointment as registered	
agent. I a	am tamilif yith fuel accept) the digities	of, Section 607.0505, F	lorida Statutes.		uhaha	
SIGNATURE	I wow to	DIRECT	OR HOTE	W/O GESTIDO JR. nature required when reinstating)	4/24/98	
12.	OFFICERS AND	OIR CTORS	13.		FFICERS AND DIRECTORS IN 12	
TITLE	<b>7</b> 0	DELETE	1.1 TITLE	ADDITIONO/OTIANGES TO O	Change Addition	
NAME	GESTIDO, ANTONIO JR		1.2 NAME			
STREET ADDRESS	600 PALM AVENUE SUITE A		1.3 STREET ADDR	IESS		
CITY+ST-ZIP	HIALEAH FL 33010		1.4 CITY - S7 - ZIP			
TITLE	D	DELETE	2.1 TITLE		Change Addition	
NAME	MACHADO, LUIS		2.2 NAME			
STREET ADDRESS	600 PALM AVENUE SUITE A		2.3 STREET ADDR	ESS		
CITY-ST-ZIP	HIALEAH FL 33010		2. 4 CITY - ST - ZIF			
TITLE	D	DELETE	3.1 TITLE		Change Addition	
NAME	MACHADO, CEFERINO		3.2 NAME			
STREET ADDRESS	600 PALM AVENUE SUITE A		3.3 STREET ADDR	IESS		
CITY-ST-ZIP	HIALEAH FL 33010		3.4. City - St - ZiF			
TITLE		☐ DELETE	4.1 TITLE	· <del>-</del>	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREFT ADDR	FSS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDR	ESS		
CITY+ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	:	☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	1		6.3 STREET ADDR	iess		

6.4 CITY-ST-ZIP

o qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information tyle and accurate and that my signature shall have the same legal effect as if made under oath; that I am an injoywered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in