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FILED  
Apr 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000083571 (5)

1. Corporation Name

PORT-A-GROOM OF FLORIDA, INC.



Principal Place of Business

1820 BRIDGE STREET  
ENGLEWOOD FL 34223

Mailing Address

1820 BRIDGE STREET  
ENGLEWOOD FL 34223-1546

2. Principal Place of Business

21 1820 Bridge St  
Suite, Apt. #, etc.

22 City & State  
Englewood, FL

23 Zip  
34223

24 Country  
USA

2a. Mailing Address

26 1820 Bridge St  
Suite, Apt. #, etc.

27 City & State  
Englewood, FL

28 Zip  
34223

29 Country  
USA

3. Date Incorporated or Qualified

10/07/1996

3a. Date of Last Report

N/A

4. FEI Number

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

MOELLER-DESMYTER, SUSAN D  
1820 BRIDGE STREET  
ENGLEWOOD FL 34223

Young

10. Name and Address of New Registered Agent

81 Name

Susan D. Young

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

1820 Bridge St

83

84 City

Englewood

FL

85 Zip Code

34223

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

Susan D. Young

(NOTE: Registered Agent signature required when reinstating)

DATE

4/08/97

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MOELLER-DESMYTER, SUSAN D  
STREET ADDRESS 1820 BRIDGE STREET  
CITY- ST- ZIP ENGLEWOOD FL 34223

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

14. I do 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:

Susan D. Young

4/08/97

(941) 475-5402

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0422804

CR2E034 (9/96)