

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000087052

Entity Name: ADORABLE DOGS, INC.

**FILED**  
**Mar 28, 2008**  
**Secretary of State**

## **Current Principal Place of Business:**

28540 BERMONT RD  
PUNTA GORDA, FL 33982

## **New Principal Place of Business:**

## **Current Mailing Address:**

28540 BERMONT RD  
PUNTA GORDA, FL 33982

## **New Mailing Address:**

FEI Number: 65-0705776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

DAMASK, CAROLINE  
28540 BERMONT RD  
PUNTA GORDA, FL 33982 US

## **Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DAMASK, CAROLINE G  
Address: 28540 BERMONT RD  
City-St-Zip: PUNTA GORDA, FL 33982

Title: S ( ) Delete  
Name: MACK, CYNTHIA  
Address: 3264 JUNCTION ST.  
City-St-Zip: NORTH PORT, FL 34286

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DAMASK, CAROLINE G  
Address: 28540 BERMONT RD  
City-St-Zip: PUNTA GORDA, FL 33982

Title: D (X) Change ( ) Addition  
Name: MACK, CYNTHIA  
Address: 3264 JUNCTION ST.  
City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Change (X) Addition  
Name: BECKER, BARBARA  
Address: 7558 DARLENE  
City-St-Zip: NORTH PORT, FL 34287

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLINE DAMASK

P

03/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date