Applied For

\$8.75 Additional

Fee Required

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000101413

1. Corporation Name

VON-DINO KENNELS, INC.

Principa	l Place	οf	Business

Mailing Address

2a. Mailing Address

Suite, Apt, #, etc.

26

27

13800 SW 8TH ST. SUITE 172 MIAMI FL 33184

2. Principal Place of Business

Suite, Apt. #, etc.

21

22

13800 SW 8TH ST. SUITE 172 MIAMI FL 33184

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

12/12/1996 4. FEI Number

65-0712418

May 04, 1999 8:00 am Secretary of State

05-04-1999 90201 028 ***150.00

City & State	9	City & State	3			6. Election Campaign Fina	- 11	\$5.00	May Be to Fees	
23		28				Trust Fund Contribution			to rees	
Zip 24	Country 25	Zip 29	Zip Country 30			This corporation owes to Personal Property Tax.		ntangible ☐ Yes	□No	
24	9 Name and Address of Current			7-		10. Name and Address of	New Registered	d Agent		
			·	81	Name					
FANDINO, REYNALDO			00	C4	van (D.O. Day Number is Not	A contable)				
13800 SW 8TH ST, SUITE 172			82	Street Addr	ess (P.O. Box Number is Not a	Acceptable)				
MIAMI FL 33184				83						
				84	City		F	L 85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Flo	rida Statutes, the	above	e-named corp	oration submits this statement	for the purpose of	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 a	ind title if applicable.	(NOTE: Register	ed Ager	t signature require	d when reinstating)	DATE			
12.	OFFICERS AND		13	ì.		ADDITIONS/CHANGES	TO OFFICERS A			
TITLE	P		DELETE 1.1	TITLE				☐ Change	☐ Addition	
NAME	Fandino, reynaldo		1.2	NAME						
STREET ADDRESS	13800 SW 8TH ST., SUITE 172		1.3	STREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL			CITY-S	T-ZIP					
TITLE			DELETE 2.1	TITLE				Change	Addition	
NAME			2.2	NAME		***				
STREET ADDRESS			2.3	STREET	ADDRESS					
CITY-ST-ZIP			2.4	CITY-S	T-ZIP			.,		
TITLE			DELETE 3.1	TITLE				Change	Addition	
NAME			3.2	NAME						
STREET ADDRESS			33	STREE	TADDRESS					
CITY-ST-ZIP			3.4	CITY-S	IT-ZIP	·				
TITLE			DELETE 4.1	TITLE				Change	☐ Addition	
NAME			4.2	NAME						
STREET ADDRESS			4.3	STREE	T ADDRESS					
CITY-ST-ZIP			4.4	CITY-S	T-ZIP					
TITLE			DELETE 5.1	TITLE				☐ Change	Addition Addition	
NAME			5.2	NAME						
STREET ADDRESS			5.3	STREE	TADORESS					
CITY-ST-ZIP				CITY-S	T-ZIP					
TITLE			DELETE 6.1	TITLE		•		Change	☐ Addition	
NAME			6.2	NAME						
STREET ADORESS			6.3	STREE	T ADORESS					
CiTY-ST-ZIP				CITY-S	1					
14. I hereby o	certify that the information supplied with on this annual report or supplemental a	innual ranort is tru	e and accurate at	id tha	t mv signature	e shall have the same legal ett	ect as it made un	der oatn: inat	i am an	
officer or e Block 12 o	director of the corporation or the receiv or Block 13 if changed, or on an attach	er or trustee empo ment with an addre	ess, with all other	tnis r like ei	eport as requ mpowered.	ired by Chapter 607, Florida S	statutes; and that	шу паше арр	6a(5 III	

SIGNATURE:

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