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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000016944 (5)

I LOVE MY PETS, INC.

FILED
May 14 1998 8:00am
Secretary of State

, 5012						
Principal Place of Business Mailing Address						
3438 EAST LAKE ROAD NO. 14 3438 EAST LAKE ROAD N						
PALM HARBOR FL 34685 PALM HARBOR FL 34685						
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address					02/19/1997 4. FEI Number 1/2/3/3 Applied For	
21	MOO OF DECIMOOD	26	g Addiess		Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #,					S8.75 Additional	
22		27	27		5. Certificate of Status Desired Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution	
Zip Country		<u></u>	Zip Country		8. This corporation owes or has paid the current year Intangible	
24 25 9. Name and Address of Curr		29	30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
VD.	<del></del>	nitelit vedisielen wäelit	81	Name	10. Name and Address of New Registered Agent	
	OSS, JONATHAN P ESQ.	۰۵	[•,			
	I CRAWFORD BLVD. STE 20	N	82	Street Add	dress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33432			83	<del> </del>		
			L			
			84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 603	7.0502 and 607.1508. Florida Sta	tutes, the abov	e-named corr	poration submits this statement for the purpose of changing its registered	
office or r	r <b>egistered agent, or</b> both, in the :	State of Florida, Such change was abligations of, Section 607.0505,	is authorized b	v the corpora	ation's board of directors. I hereby accept the appointment as registered	
•	in terminal with and occept the	Jourganons of, Section 600, Society	Tiorida Statute	э.		
SIGNATURE	Signature, typed or printed frame of register	ed agent and title if applicable (N	OTL: Registered Ag	ont signature requi	ired when reinstating) DATE	
12.	OF FICE RS	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		1.1 TITLE	j	☐ Change ☐ Addition	
NAME BROWN, ANDREA L			1.2 NAME			
STREET ADDRESS 3438 EAST LAKE ROAD NO			1.3 STREET ADDRESS			
CITY-ST-ZIP	PALM HARBOR FL 34685		1.4 CITY-ST-ZIP		Tales	
TITLE		☐ DELETE	2.1 TITLE 2.2 NAME	1	☐ Change ☐ Addition	
NAME						
STREET ADDRESS			2.3 STREET ADDRESS		·	
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY- 3.1 TITLE	ST-ZIP	Change Addition	
NAME			3.2 NAME	1		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			3.3 STREE			
TITLE			4.1 TITLE	O1* EH	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY - S			
TITLE	DELETE		5.1 TITLE		Change Addition	
NAME			5.2 NAME		•	
STREET ADDRESS	ADDRESS		5.3 STREET	T ADDRESS		
CITY-ST-ZIP	<u> </u>		5.4 CITY - 9	ST-ZIP		
TITLE	] DELETE		6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	i address		
CITY-ST-ZIP			6.4 CITY - S			
14. I hereby of indicated	certify that the information suppli- on this annual report or supplier	ed with this filing does <b>not qual</b> ify nental annual report is true and a	y for the exemp securate and th	otion stated in lat my signati	n Section 119.07(3)(i), Florida Statutes. I further certify that the information ure shall have the same legal effect as if made under oath; that I am an	
officer or	director of the corporation or live or Block 13 if changer, or on an	receiver or trustee empowered t	to execute this	report as req	uired by Chapter 607, Florida Statutes; and that my name appears in	