2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000020660**

1. Entity Name

AN ANIMAL LOVER'S PET SITTING SERVICE CO.



FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90474 026 ***150.00

Principal Place of Business 6772 COLUMBIA AVENUE LAKE WORTH FL 33467-7734	Mailing Address 6772 COLUMBIA AVENUE LAKE WORTH FL 33467-7734						
2. Principal Place of Business 6586 Geneva Street Suite, Apt. #, etc. 3. Mailing Address 6586 Geneva Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
Lake Worth FL	City & State LAKE WOY 4	\ FL	4.	FEI Number 65-07	41400		oplied For ot Applicable
Zip 34167 Country	2ip 2467	Country	5.	Certificate of Status D	Desired	\$8.75 Add Fee Require	
6. Name and Address of Current P	legistered Agent		7.	Name and Address	of New Registered	l Agent	
ROUSSIN-SCHUSTER, NICOLE M 6772 COLUMBIA AVENUE LAKE WORTH FL 33467-7734		65	· · ·	ya Kar Box Number is Not Ac Jeneva	Street	- Zia-Cori	e, (, -1
		City	<u>RKC</u>	Worth	<u> </u>		5461
8. The above named entity submits this statement for the obligations of registered agent. SIGNATURE Signature, typed or printed ramy of registered agent at the statement for the obligations of registered agent at the statement for the obligations of registered agent at the statement for the obligations of registered agent at the statement for the obligations of registered agent at the statement for the obligations of registered agent.	arp	egistered office or r	<u> </u>	reinstating)	paign Financing	-03	and accept
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of	State			Trust Fund Co	ontribution.	☐ Added	d to Fees
10. OFFICERS AND [DIRECTORS	11.		ADDITIONS/CHANGES	S TO OFFICERS AN		
TITLE PST NAME ROUSSIN-SCHUSTER, NICOLE M 6772 COLUMBIA AVENUE LAKE WORTH FL 33467-7734	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST Tanu 6586 Lake	a Karp Geneva	Street FL 33	Mchange 3467	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delête	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
12. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emportanged, or on an attachment with an address, we SIGNATURE:	true and accurate and that my wered to execute this report a	v signature shall ha	ive the sam	e legal ettect as it mag	ie finder datu, toat.	i am an oilicer	or alrector of