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 # P97000036655

PAMPERED PUPS & PETS, INC.

Principal Place of Business

Mailing Address

FILED Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90019 042 ***150.00



2828 S MCCALL ENGLEWOOD FL		2828 S MCCALL UNITS 17 & 18 ENGLEWOOD FL 34224			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 0.4/20/1400.7			
					04/23/1997 4. FEI Number			applied For
Principal Place of Business 2a. Mailing Address					· =:			lot Applicable
21		26			65-0748910			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	rea required			
City & State		City & State	City & State		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Zip Country Zip				8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No			□No
	9. Name and Address of Curren				10. Name and Address of New	Registered	Agent	
			81	Name				
BRENNEMAN, TERRY D 2828 S MCCALL UNITS 17 & 18			82	Street Add	dress (P.O. Box Number is Not Accept	table)		
	EWOOD FL 34224		83				14.3	
			84	City		FL	85 Zip	Code
agent. I ar	agistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered agent	dions of, Section 607.0303, 1 folia	a Glatotos	•	rporation submits this statement for the tion's board of directors. I hereby acce ared when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	P	☐ DELETE	1.1 TITLE		No. of		Change	Addition
NAME	CAROL R BRENNEMAN		1.2 NAME					
STREET ADDRESS	2800 N BEACH RD #A104		1.3 STREE	TADDRESS				
CITY-ST-ZIP	ENGLEWOOD FL 34223		1.4 CITY-S	T-ZIP				
TITLE	VPT	☐ DELETE	2.1 TITLE				☐ Change	∌ ☐ Addition
NAME	TERRY D BRENNEMAN		2.2 NAME					•
STREET ADDRESS	2800 N BEACH RD #A104		2.3 STREE	T ADORESS				į
CITY-ST-ZIP	ENGLEWOOD FL 34223		2, 4 CITY-5	ST-ZIP				
TITLE (1995)	J . ,	□ DELETE	3.1 TITLE				Change	a
NAME 5	CAROL R BRENNEMAN		3.2 NAME					
STREET ADDRESS	2800 N BEACH RD #A104		3.3 STREE	TADDRESS		Segular	100	. ,
CITY-ST-ZIP	ENGLEWOOD FL 34223		3.4. CITY-5	ST-ZIP				
TITLE		☐ DELETE	4,1 TITLE	ĺ			☐ Change	e
NAME			4, 2 NAME					
STREET ADDRESS	•		4.3 STREE	T ADDRESS				į
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				T A d Pains
TITLE		☐ DELETE	5.1 TITLE				Change	e
NAME			5.2 NAME					
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				Chang	e
NAME	[[[[]]]] []		6.2 NAME					
STREET ADDRESS	\$ '.		6.3 STREE	TADDRESS				
	l .		CACITY O	מול די				

14. I 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 suppliemental 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, with all other like empowered.