


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

FILED

Apr 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000038886 (2) 1. Corporation Name PETS ON THE BEACH, INC.					
Principal Place of Business 1661 ESTERO BLVD. SUITE 4A FT MYERS BEACH FL 33931			Mailing Address 1661 ESTERO BLVD. SUITE 4A FT MYERS BEACH FL 33931		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc		26 1528 SE 20TH CT		04/29/1997	
22 City & State		27 Suite, Apt. #, etc.		4. FEI Number 65-0792573 311-72-8911	
23 Zip		28 Cape Coral, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Country		29 33990		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
SCHAEFER, LAURA L 1661 ESTERO BLVD, SUITE 4A FT MYERS BEACH FL 33931			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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 <u>Laura L. Schaefer</u> LAURA L. SCHAEFER 4/20/98 <small>(Signature, typed or printed name of Registered Agent, and title if applicable) (NOTE: Registered Agent signature required when re-nesting) DATE</small>					
12. OFFICERS AND DIRECTORS					
1.1 TITLE <input type="checkbox"/> DELETE					
1.2 NAME D SCHAEFER, LAURA L					
1.3 STREET ADDRESS 1661 ESTERO BLVD, SUITE 4A					
1.4 CITY-ST-ZIP FT MYERS BEACH FL 33931					
2.1 TITLE <input type="checkbox"/> DELETE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE <input type="checkbox"/> DELETE					
3.2 NAME					
3.3 STREET ADDRESS					
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4.4 CITY-ST-ZIP					
5.1 TITLE <input type="checkbox"/> DELETE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> DELETE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME Laura L Schaefer					
1.3 STREET ADDRESS 1528 SE 20TH CT					
1.4 CITY-ST-ZIP CAPE CORAL, FL 33990					
2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
2.2 NAME Christopher R. Schaefer					
2.3 STREET ADDRESS 1528 SE 20TH CT					
2.4 CITY-ST-ZIP Cape Coral, FL 33990					
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
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 supplemental 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.					
SIGNATURE: <u>Laura L. Schaefer</u> President 4/20/98 941-772-0899					



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)