

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000042334

Entity Name: PETSWARE, INC.

FILED
Mar 23, 2005
Secretary of State

Current Principal Place of Business:

100 E SYBELIA AVE STE 225
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

100 E SYBELIA AVE STE 225
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3449739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LANGFORD, SHARON
100 E SYBELIA AVE STE 225
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LANGFORD, SHARON
Address: 100 E SYBELIA AVE STE 225
City-St-Zip: MAITLAND, FL 32751

Title: AS (X) Delete
Name: MARKO, MARY
Address: 100 E SYBELIA #224
City-St-Zip: MAITLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LANGFORD HAGLE, SHARON
Address: 100 E SYBELIA AVE STE 225
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON LANGLORD HAGLE

P

03/23/2005

Electronic Signature of Signing Officer or Director

Date