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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATI

**FILED** 

May 12 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700063666 (6)

JAN'S GROOMING & PET SUPPLIES INC.

Principal Place of Business Mailing Address				T TOOLINGS HIS PALLE CONT. ONLY BOTH BALL BLIEB EILEN ALLES ASSES OF THE STATE OF T					
2316 CRILL AVE.		2316 CRILL AVE.	2316 CRILL AVE.						
PALATKA FL	32177	PALATKA FL 32177	PALATKA FL 32177			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						07/22/1997			
2, Principal P	lace of Business	2a, Mailing Address				4. FEI Number Applied For			
21		26				59-34(01030) Not Applicable			
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional			
22		27				Fee Required			
City & State	<del>9</del>	City & State				6. Election Campaign Financing \$5.00 May Be			
Zip Gountry		Z(p)				Trust Fund Contribution Added to Fees			
24	25	29	30	,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No			
	g Name and Address of Curre	* * · · · · · · · · · · · · · · · · ·	1221			10. Name and Address of New Registered Agent			
DA	VIS, MARGARET	The second secon		81 N	lame	,			
	6 CRILL AVE.		-	<b>82</b> S	treet Addre	ess (P.O. Box Number is Not Acceptable)			
PAL	.ATKA FL 32177					The second of th			
				83					
			<u></u>	84 C	City	85 Zip Code			
·					-	FL   T   T			
Office or ri	e <b>gistere</b> d agent, or both, in the State	e of Horida. Such change was	authorized	by the	amed corpo e corporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered			
agent. Lai	m <b>fam</b> iliar with, and accept the obliq	jations of, Section 60 <b>7.0</b> 505, F	lorida Stati	ites		, , , , ,			
SIGNATURE	Signature, typed or pointed name of registered as	oe it and title if anolicable (NO)	If Buo stated	Anosy si	ionature require	nd when reinstating) DATE			
12.		VID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	DELETE	111111	.E	T	Change Addition			
NAME DAVIS, MARGARET			12 NAME						
STREET ADDRESS 2316 CRILL AVE.			1.3 STREET ADDRESS		ORESS				
CITY-ST-ZIP	PALATKA FL 32177		1400	Y - S1 - Z)	P				
TITLE		☐ DELETE	2 1 1110			Change Addition			
NAME			2.2 NA						
STREET ADDRESS				EET ADD					
CITY-ST-ZIP TITLE		DELETE	2. 4 CH 3.1 MH	Y-SI-Z	P	Change Addition			
NAME		Cal occur	3.2 NAM			Notinon			
STREET ADDRESS				EE1 ADD	)BESS				
CITY-ST-ZIP				Y-SI-ZI					
TITLE		☐ DELFTE	4.1 111			Change Addition			
NAME			4. 2 NA	MF	ļ				
STREET ADDRESS			4.3 STR	EE1 ADD	IRESS				
CITY-ST-ZIP			4.4 CIT	Y - ST - ZII	Р				
TITLE		☐ DELETE	5.1 1116	F		Change Addition			
NAME			5.2 NAM	Al-					
STREET ADDRESS			53 SIR	EE1 ADD	RESS				
CITY-ST-ZIP	<del></del>	Поли		/-SI-ZII	Р				
TITLE		☐ DELETE	6.1 THU			Change Addition			
NAME			62 NAN	AE 	1000				

14. I hereby corlify 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.