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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

P97000090056 (7)

DIVERSIFIED WHOLESALE PETS, INC.

Principal Place of Business Mailing Address 429 FLORIDANA DRIVE 429 FLORIDANA DRIVE APOLLO BEACH FL 33572 APOLLO BEACH FL 33572 2. Principal Place of Business 2a. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State 28 23

FILED Jan 29 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/20/1997 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required **\$5.00** May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Ζlp Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LEININGER, RICHARD 429 FLORIDANA DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) APOLLO BEACH FL 33572 83 84 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 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition SÄVIDGE, WARREN NAME 1.2 NAME 7620 LOVEGREN LANE STREET ADDRESS 1.3 STREET ADDRESS GIBSONTON FL 33534 CITY - ST - ZIP 1.4 C(T)Y - \$T - Z/P DELETE Change TITLE DIP 2.4 TITLE Addition LENINGER, RICHARD 22 NME NAME STREET ADDRESS 429 FLORIDANA DRIVE 2.3.5 REET ADDRESS CITY - ST - ZIP APOLLO BEACH FL 33572 TY-ST-ZIP DELETE TITLE 3.1 T Change Addition NAME MISTRETTA, DANIEL 3.21 Mê STREET ADDRESS 1919 33RD STREE SE 3.3 3 REET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP Y-ST-ZIP 3.4. D/5/T DELETE Addition TITLE 4.1 BUZBEE, CAROLYN M NAME STREET ADORESS 1919 33RD STREET SE eet address RUSKIN FL 33570 CITY-ST-ZIP - ST - ZIP DELETE Change Addition TITLE 5.1 5.2 NAME ESTES, DAVID 10235 COWLEY ROAD 5.3 STREET ACCRESS ≘T ADDRESS RIVERVIEW FL 33569 CITY-ST-ZIP DELETE ò. Change Addition 6.2 STREET ADDRESS T ADDRESS · ST- ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the endicated on this annual report or supplemental annual report is true and accurate at officer or director of the corporation or the receiver or trustee empowered to execute Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

iption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information hat my signature shall have the same legal effect as if made under oath; that I am an s report as required by Chapter 607, Florida Statutes; and that my name appears in

1/22/98

(813)677-7136

CR2E034