

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000025544

Entity Name: ANIMAL ASSOCIATES, INC.

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

997 MAIN STREET
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

955 DELAWARE ST.
SAFETY HARBOR, FL 34695 US

Current Mailing Address:

997 MAIN STREET
SAFETY HARBOR, FL 34695 US

New Mailing Address:

955 DELAWARE ST.
SAFETY HARBOR, FL 34695 US

FEI Number: 59-3510433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINKELSTEIN, BRETT M
997 MAIN STREET
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

FINKELSTEIN, BRETT M
955 DELAWARE ST.
SAFETY HARBOR, FL 34695 US

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: BRETT FINKELSTEIN

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: FINKELSTEIN, BRETT M
Address: 997 MAIN STREET
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FINKELSTEIN, BRETT M
Address: 955 DELAWARE ST.
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRETT FINKELSTEIN

CEO

04/25/2007

Electronic Signature of Signing Officer or Director

Date