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

Mailing Address

21243 SOUTHWEST 94TH COURT

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P98000059353**1. Corporation Name

Principal Place of Business

21243 SOUTHWEST 94TH COURT

INTERNATIONAL K-9, INC.

MIAMI FL 33189			MIAMI FL 33189				DO NOT WRITE IN THIS S	DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed				
							07/06/1998				
2. Principa	I Place of Business	· · · · · · · · · · · · · · · · · · ·	2a. Mailing Address			•	4. FEI Number	F	Applied For		
21			26				65-0874080		Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional		
22			27				5. Ovinidate of States Session [2]	Fee F	Required		
City & State			City & State	——— ·			6. Election Campaign Financing		0 мау Ве		
23			Zip Country				Trust Fund Contribution		d to Fees		
Zip						g. This corporation sweet the serious year managers					
24 25 29 29				30			Personal Property Tax. Lives ZNo 10. Name and Address of New Registered Agent				
9. Name and Address of Current Registered Agent						81 Name					
MENOCAL, CYNTHIA E 21243 SOUTHWEST 94TH COURT MIAMI FL 33189					L						
					82	Street Address (P.O. Box Number is Not Acceptable)					
					83						
					L						
					84	City	FL	85 Zip	Code .		
11 Pursua	ant to the provisions	of Sections 607 0502	and 607 1508. Flori	da Statutes, the	e above	i e-named	d corporation submits this statement for the purpose of c	hanging i	ts registered		
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.											
SIGNATU	RE Signature, typed or pri	inted name of registered agent ar	nd title if applicable.	(NOTE: Regist	ered Ager	it signature	e required when reinstating) DOTE				
12.		OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECT			
TITLE	D		[] Di	ELETE 1.	1 TITLE			☐ Change	e 🗌 Addition		
NAME					1.2 NAME				{		
STREET ADDRESS 21243 SOUTHWEST 94TH COURT				1.	1.3 STREET ADDRESS		s				
CITY-ST-ZIP MIAMI FL 331891					1.4 CITY-ST-ZIP						
TITLE			[] D	ELETE 2	.1 TITLE			Change	e 🔲 Addition		
NAME	Ì			2.	2 NAME				İ		
STREET ADDR	ESS			2.	.3 STREET	ADDRESS	s		1		
CITY-ST-ZIP					4 CITY-S	T-ZIP			77.4 (47)		
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NAME				3.	2 NAME						
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CITY-ST-ZIP					4. CITY-S	T-ZIP		Change	e		
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CITY-ST-ZIP			——————————————————————————————————————		4 CITY-S	r-zip		Change	e Addition		
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NAME				.		r address			ſ		
STREET ADDR	ESS				.3 STREET		~		ļ		
CITY-ST-ZIP					1 TITLE	- 211	 	Change	e		
NAME			ال ال		2 NAME						
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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, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

FILED

May 10, 1999 8:00 am Secretary of State

05-10-1999 90161 030 ***150.00

CR2E034 (11/98)