
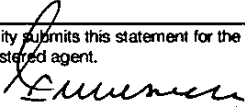
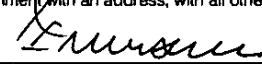


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90250 031 ***150.00

DOCUMENT # P98000092890 1. Entity Name LOS ANDES KENNELS, INC.					
Principal Place of Business 8569 SOUTHERN BLVD WEST PALM BEACH, FL 33411			Mailing Address PO BOX 33224 PALM BEACH GARDENS, FL 33420		
2. Principal Place of Business 8201 SW FOX BROWN ROAD		3. Mailing Address "Same"			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State INDIANTOWN, FL		City & State		4. FEI Number 52-2128029	
Zip 34956		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZEBALLOS, RAUL 8569 SOUTHERN BLVD WEST PALM BEACH, FL 33411			7. Name and Address of New Registered Agent Name ZEBALLOS, RAUL Street Address (P.O. Box Number is Not Acceptable) 8201 SW FOX BROWN ROAD City INDIANTOWN FL Zip Code 34956		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Raul Zeballos, Pres. 04.25.05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD ZEBALLOS, RAUL <input type="checkbox"/> Delete 8569 SOUTHERN BLVD WEST PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 8201 SW FOX BROWN RD. Indiantown, FL 34956	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SEVERYN, ALMA <input type="checkbox"/> Delete 8569 SOUTHERN BLVD WEST PALM BEACH, FL 33411		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 8201 SW FOX BROWN RD Indiantown, FL 34956	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Raul Zeballos, Pres. 04.25.05 (561) 313-5486 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					