

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 29, 2002 8:00 am
Secretary of State

08-07-2002 90182 018 ***150.00

DOCUMENT # P99000048933

1. Entity Name

NUTRA PET, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9221 S. BRITTANY PATH

3. Mailing Address

9221 S. BRITTANY PATH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
INVERNESS FL

City & State
INVERNESS FL

4. FEI Number

59-3584709

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name - HOWARD - STEINBERG

Street Address (P.O. Box Number is Not Acceptable)
1720 HARRISON ST 7B

City HOLLYWOOD

FL

Zip Code
33020

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January (May) Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JACOBS, MICHAEL
9221 S. BRITTANY PATH
INVERNESS, FL 34452-9559

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR

8/05/02

954-401-4560

Daytime Phone #

CR2E0348 (12/01)

Attachment
P99000048933 98e15

August 5, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Nutra Pet, Inc.
FEI # 59-3584789

Gentlemen:

Enclosed please find a check for the amount of \$150 along with the 2002 Uniform Business Report. I never received the original in the mail.

Please accept my payment and waive all penalties and interest and kindly show my corporation Nutra Pet, Inc. as being active.

Thanking you in advance for your prompt attention to this matter.

Sincerely,


Michael Jacobs