2005 FOR PROFIT CORPORATION ANNUAL REPORT

of the corporation or the receiver or truste changed, or on an attachment with an ad-

DOCUMENT # P99000098136 Jan 21, 2005 08:00 AM Secretary of State PUPPY DREAMS, INC. Principal Place of Business Mailing Address **703 SOUTH VINELAND** 703 SOUTH VINELAND WINTER GARDENS, FL 34787 WINTER GARDENS, FL 34787 CR2E034 (10/03) 01102005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3607655 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BASICA, ANTHONY R DO NOT WRITE 703 SOUTH VINELAND WINTER GARDENS, FL 34787 IN THIS SPACE 3. 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. Signature, typod or printed name of registered agent and title if applicable (NOTE, Rogistered Agent signature regulted when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. П Added to Fees OFFICERS AND DIRECTORS 10. ĎΫ U00000188737 TITLE 01/24/05-80068-001 150.00 NAME BASICA, RAYMOND D STREET ADDRESS 418 N. LAKEVIEW AVE. CITY -ST-ZIP WINTER GARDEN, FL 34787 DTS TITLE BASICA, JUANITA L NAME STREET ADDRESS 418 N. LAKEVIEW AVE. WINTER GARDEN, FL 34787 CITY-ST-ZIP DP TITLE BASICA, ANTHONY R MAME STREET ADDRESS 566 SAND LIME RD #197 DO NOT WRITE WINTER GARDEN, FL 34787 CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 in the corporation of 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 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

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