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

PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$30889

(7)

RX FOR FLEAS/FRESNO, INC.

FILED Jan 29 1997 8:00am Secretary of State



Principal Place	9 Of Business	Malling Addre	Mailing Address						
2801 BERING DR. UNIT K SAN JOSE CA 33308		SUITE 412	6555 N.W. 9TH AVE. SUITE 412 FT. LAUDERDALE FL 33309-2051						
US						3. Date Incorporated or Qualified 02/11/1991	3a. Date of Last Report 06/19/1996		
	lace of Business	2a. Mailing Ac	idress	,		4. FEI Number		Applied For	
21	# -1-	26	4 -4-			65-0243460		Not Applicable	
Suite, Apt.		27				5. Certificate of Status Desired		5 Additional Required	
City & State	Ð	—	City & State			6. Election Campaign Financing	, , , , , , , , , , , , , , , , , , ,		
Zip Country		28 Zip	Zip Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199,032,				
24	25	29	5	30			ntangible tax unde l Yes No	er s. 199,032,	
	9. Name and Address of Current					10. Name and Address of New Reg	jistered Agent		
	MUTH, MELVIN			81	Name				
179			82 Street Addr		idress (P.O. Box Number is Not Acceptable	le)			
BOO	CA RATON FL 33496					· · · · · · · · · · · · · · · · · · ·			
				63	{			·	
				84	City		85 Z	ip Code	
11 Pureuppt	to the provisions of Sections 607 0500	2 and 607 1508 El	wide Statutor	c the above	named or	orporation submits this statement for the pr	FL 65 2	ig its registered	
office or re	egistered agent, or both, in the State	of Florida, Such ch	ange was au	utnorized by	the corpo	ration's board of directors. I hereby accep	t the appointment	as registered	
- •	m familiar with, and accept the obliga	tions of, Section 60	J7.0505, Flor	ida Statutes	3.				
SIGNATURE	Signature, typed or printed name of registered ager	n and title if applicable	(NO1E	Registered Age	ent signature re-	quired when reinstating)	DATI		
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECT	ORS IN 12	
TITLE	DV		DELETE	1.1 TITLE			Chan	ge Addition	
NAME	YARMUTH, ROBERT S.			1.2 NAME				ļ	
STREET ADDRESS	10714 SANTA LAGUNA DRIVE			1.3 STREET	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33428		A F. 575	1.4 CITY-S	11 - 21P				
TITLE	DPST		DELETE	2 1 TITLE			L] Chan	ge 🔝 Addition	
NAME	YARMUTH, MELVIN J 17952 FIELD BROOK CIR			2 2 NAME					
STREET ADDRESS	BOCA RATON FL 33496			23 STREET	ì			l l	
CITY-ST-ZIP TITLE	BOOK INTOIL IE CO120		DELETE	2 4 CITY-:	S1 - 7IP		Chan	ge Addition	
NAME			pecere	3.2 NAME				go Addition	
STREET ADDRESS				3.3 STREET	ADDRESS			İ	
CITY-ST-ZIP				3.4. CITY-)	
TITLE			DELETE	4.1 TITLE			☐ Chan	ge Addition	
NAME				4 2 NAME					
STREET ADDRESS				4 3 STREET	ADDRESS			ľ	
CITY-ST-ZIP				4.4 CITY - S	ST - ZIP				
TITLE			DELETE	5.1 THILE			Chan	ge 🔲 Addition	
NAME				5.2 NAME				ł	
STREET ADDRESS				5.3 STREET					
CITY-ST-ZIP			DELETE	5.4 CITY - S	ST-ZIP		<u> </u>	00 14400	
TITLE			DELETE	6.1 TITLE			L Chan	ge L Addition	
NAME OTRET ABOREOU				6.2 NAME	- ADDOCOD				
STREET ADDRESS				63 STREET					
CITY-ST-ZIP		·		6.4 C/TY - S	ST-ZIP				

14. I do 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.

SIGNATURE: