

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

FILED  
Apr 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S30889 (7)

1. Corporation Name  
RX FOR FLEAS/FRESNO, INC.

Principal Place of Business

2801 BERING DR.  
UNIT K  
SAN JOSE CA 95130  
US

Mailing Address

6555 N.W. 9TH AVE.  
SUITE 412  
FT. LAUDERDALE FL 33309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	02/11/1991	65-0243460	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	6. Election Campaign Financing	\$8.75 Additional Fee Required
23 Zip	28 Zip	<input type="checkbox"/>	Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

YARMUTH, MELVIN  
17952 FIELDBROOK CIRCLE  
BOCA RATON FL 33496

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change Addition
NAME	YARMUTH, ROBERT S.	1.2 NAME	
STREET ADDRESS	10714 SANTA LAGUNA DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33428	1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	Change Addition
NAME	DPST YARMUTH, MELVIN J	2.2 NAME	
STREET ADDRESS	17952 FIELD BROOK CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE

CR2E034 (10/97)