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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S62822

(9)

Principal Place of Business

PALM TREE PETS, INC.

Mailing Address

|--|--|

**FILED** 

Apr 21 1997 8:00am

Secretary of State

LARGO FL 34640-3620		LARGO FL 33770-3620							
					3. Date in 06/20/	corporated or Qualified	3a. Date of Last Report 05/01/1996		
2. Principal Place of E	NALSINGHAM Rd	2a. Mailing Address 26 11770 Wal	SINGho	m Rd	4. FÉI NU	mber <b>)71982</b>	. —	pplied For	
21 // // // Suite, Apt. #, etc.	ייתוון יוניון און	26 // 7 70 // Vac Suite, Apt. #, etc.					¢0.75	lot Applicable Additional	
22		27			5. Certific	ate of Status Desired	, , , , , ,	lequired	
City & State  LARGO		City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
33778	Country 25	33778	Count 30	ry	i i	rporation has liability for i Statutes	intangible taxunder:	s. 199.03 <i>2</i> ,	
	me and Address of Current	Registered Agent			10. Name	and Address of New Re	gistered Agent		
STAZKO, JO			8	1 Name					
LARGO FL 94640 83 Street Address (P.O. Box N				Number is Not Acceptate  /a LS ING NA					
			8	4 City	ARGO		FL 85 광	Code 3778	
11. Pursuant to the pr	ovisions of Sections 607.0502	and 607.1508. Florida Statu	ites, the abo	ve-named	corporation submi	ts this statement for the c	ourpose of changing	its registered	
SIGNATURE Say	d agent, or both, in the State of a state of	and title if applicable (NO			required when reinstating		DATE		
TITLE VP	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	1.1 TITLE	Ī			Change	Addition	
	O, JOHN R.		1.2 NAM	E ]			. 1.1		
STREEF ADDRESS 471 SI	eminole BLVD. ) fl		1.3 STRE 1.4 City	ET ADDRESS	LANCO	Walsingh	or 140 778		
TILE P		☐ DELETE	2.1 TITLE		- 4. / -	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
	O, PRESLEY CARLA		2.2 NAM	£		and Oak to Sam			
	EMINOLE BLVD.		2.3 STRE	ET ADDRESS	11770 1	NULSINGHE FL 337	m pa		
CITY-ST ZIP LARGO	) FL	0.000		-ST-ZIP	iongo	pc 33,		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE		☐ DELETE	3.1 TITLE		•		Change	Addition	
NAME			3.2 NAM	1					
STREET ADDRESS			1	ET ADDRESS					
C-TY - ST - ZIP TILLE		DELETE	4.1 TITLE	-ST-21P			Change	Addition	
NAME		Land Product in	4. 2 NAM	I				, , , , , ,	
STREET ADDRESS				ET ADDRESS					
CITY - ST - ZIP			4.4 CITY						
TITLE		DELETE	5 1 TITLE				Change	Addition	
NAME			52 NAM	E }					
STREET ADDRESS			5 3 STRE	ET ADDRESS					
CITY-\$1-ZIP			5.4 CITY	-ST-ZIP					
TOTALE		DELETE	6.1 TITLE				☐ Change	Addition	
NAME			6.2 NAM	E					
STREET ADDRESS			6.3 STRE	ET ADDRESS					

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.

6.4 CITY-ST-ZIP

SIGNATURE: