SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). **PROFIT** FLORIDA DEPARTMENT OF STATE riltu SEUREIARY OF STATE CORPORATION Katherine Harris Wision of corporations ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 99 OCT 22 PH 12: 01 DOCUMENT # s68802 PET WORLD OF MIAMI./NC. Mailing Address 7575 S.W.127 AVE. 7575 S.W.127 AVE. DO NOT WRITE IN THIS SPACE MIAMI, FL 33183 MIAMI, FL 33183 3. Date Incorporated or Qualified 7/25/91 2. Principal Place of Business 2a. Mailing Address Applied For 65-0315834 21 7575 S.W. 127 AVE 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 MIAMI, FL 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes the current year Yes No 30 Intangible Personal Property. 24 33183 U.S.A 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KARINA PUBCHARA
Street Address (P.O. Box Number is Not Acceptable)
3040 S.W 130 AVE. FRANK J. PUBCHARA 7835 S.W. 127 COURT MIAMI, FL. 33183 City MIAMI 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 (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRESIDENT/SECRETARY/TREA. Change Addition TITLE 1.1 TITLE PRESIDENT/SECRETARY/TRESIDELETE 1.2 NAME FRANK J. PUBCHARA KARINA PUBCHARA STREET ADDRESS 1.3 STREET ADDRESS 7835 S.W. 127 COURT 3040 S.W.130 AVE. CITY-ST-ZIP 1.4 CITY-ST-ZIP MIAMI, FL .33183 MIAMI FL . 33175 TITLE DELETE 2.1 TITLE Change Addition 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ Change ☐ Addition 100003033071—5 -11/02/99--01099--007 3.1 TITLE TITLE DELETE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-2IP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-2IP 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:

\*\*SIGNATURE\*\*

(2/36) **CR2E034** 

10/18/99 (305)266-1058 OF SIGNING OFFICER OR DIRECTOR

October 14, 1999

Reinstatement Department ATTN: CHANG

Gentlemen:

As per today telephone conversation with Mr. Chang, please enclosed find the reinstatement form for Pet World of Miami, Inc and a check for \$ 150.00.

We never receive your form and because of that it was not paid on time note that the address you have is not the correct one.

Thank for your attention waiting for your prompt answer we remain.

Very Thank,

Karina Puchara

Kau Pouce