## **FILED** Mar 03, 2003 8:00 am § Secretary of State

03-03-2003 90414 022 \*\*\*150.00

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**)

## S84309 **DOCUMENT #**

1. Entity Name

LOVING TOUCH GROOMERS, INC.

<u> </u>						COD WE						
Principal Place of Business 9544 S.W. 137TH AVENUE MIAMI FL 33186 US				Mailing Address 11921 S.W. 134TH CT. MIAMI FL 33186								
2. Principal Place of Business				3. Mailing Address								
Suite, Apr	t. #, etc.		Sui	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			Cit	City & State				4. FEI Number 65-0313414			<del></del>	pplied For lot Applicable
Zip		Country	Zip		Coun	itry	- 1 2	5. Certificate of Sta	atus Desired		8.75 Ad	iditional
	6. Name	and Address	of Current Register	ed Agent	ı	T	7	7. Name and Add	ress of New Regi		•	
					1	Name				010100 719		
CAPURS( 11921 S.)	o, gary W. 134th C	т.		Street Addre			dress (P.C	s (P.O. Box Number is Not Acceptable)				
MIAMI FL 33186							·	·				
		,			i	City		,	7.00	FL	Zip Coc	le
SIGNATURE	Signature, typed FILE NOW!!	or printed name of  ! FEE IS \$ 03 Fee will b	e \$550.00	<del>.</del>	- II.	ed office or ri		en reinstating)  9. Election	the State of Florida Campaign Financ nd Contribution.	DATE	\$5.0	and accept  May Be d to Fees
Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 11.												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS CAPURSO			□ Delete	CITY-	ET ADDRESS ST-ZIP		ADDITIONS/CHAP	NGES TO OFFICE	[	□ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	CAPURSO,	ROSALYNN . 134 COUR		☐ Delete						L	_] Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		i					☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Oelete		T ADDRESS ST-ZIP		•			] Change	Addition
			upplied with this filing tal report is true and sustee empowered to a address, with all oth			nption stated ure shall have ed by Chapte	in Section the same or 607, Flo	on 119.07(3)(i), Flori de legal effect as if i prida Statutes; and	ida Statutes. I furti made under oath; that my name app	her certify that I am a bears in Bl	that the in an officer ock 10 or	oformation or director Block 11 if

SIGNATURE: