

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

FILED

May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V10175 (0)
1. Corporation Name
PET'S FRIEND, INC.



Principal Place of Business
5871 N UNIVERSITY DR
SUITE 720
TAMARAC FL 33321
US
Mailing Address
5871 N. UNIVERSITY DR
#720
TAMARAC FL 33321
Pet's Friend, Inc.
5871 N. University Dr #720
Tamarac, FL 33321
(954) 720-0794

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		01/28/1992	
Suite, Apt. #, etc. #86		Suite, Apt. #, etc. Suite 86		4. FEI Number	
7154 N University Drive		7154 N. University Drive		65-0313555	
City & State		City & State		Applied For	
23 TAMARAC FL		28 TAMARAC FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33321		29 33321		8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25		30		Trust Fund Contribution	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30. Yes No	

9. Name and Address of Current Registered Agent

SWIFT, RUSSELL
7515 NW 88TH WAY
TAMARAC FL 33321

10. Name and Address of New Registered Agent

81 Name Laiso Chow
82 Street Address (P.O. Box Number is Not Acceptable)
21663 NAPA CT
83
84 City BOCA RATON FL 85 Zip Code 33433

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

Laiso Chow

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Change Addition
NAME	SWIFT, RUSSELL	1.2 NAME	Laiso Chow
STREET ADDRESS	7515 NW 88TH WAY	1.3 STREET ADDRESS	21663 Napa Ct
CITY-ST-ZIP	TAMARAC FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33433
TITLE	DELETE	2.1 TITLE	Change Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 provided 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 Section 2 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Laiso Chow

CR2E034 (10/97)