

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

FILED

May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L96141** (1)
1. Corporation Name
NOVAPET, INC.



Principal Place of Business 3300 CORPORATE AVENUE SUITE 110 FT. LAUDERDALE FL 33331	Mailing Address 3300 CORPORATE AVENUE SUITE 110 FT. LAUDERDALE FL 33331-3504
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3. Date Incorporated or Qualified 08/15/1990	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0245962	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 3665 SW 30 Ave	2a. Mailing Address 3665 SW 30 Avenue
21. Suite, apt. #, etc.	26. Suite, apt. #, etc.
22. City & State Ft. Lauderdale, FL	27. City & State Ft. Lauderdale, FL
23. Zip 33312	28. Country Broward
24. Zip 33312	29. Country Broward

9. Name and Address of Current Registered Agent

RICATTI, JUAN C
3300 CORPORATE AVE
SUITE 220
FT. LAUDERDALE FL 33331

10. Name and Address of New Registered Agent

81. Name Eduardo Klinger
82. Street Address (P.O. Box Number is Not Acceptable) 3665 SW 30 Ave
83. City Ft. Lauderdale, FL
84. Zip Code 33312

11. Pursuant to the provisions of Sections 607.0502 and 607.1905, 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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE CEO	☒ DELETE	1.1 TITLE C.O.O.	☒ ADD ☐ Jition
NAME RICATTI, JUAN C		1.2 NAME Klinger, Eduardo	
STREET ADDRESS 1581 EASTLAKE DR.		1.3 STREET ADDRESS 3665 SW 30 Ave	
CITY-ST-ZIP FT. LAUDERDALE FL		1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33312	
TITLE DST	☒ DELETE	2.1 TITLE President	☒ ADD ☐ Jition
NAME RICATTI, JUAN C		2.2 NAME Horowitz, Symcha	
STREET ADDRESS 1581 EASTLAKE DR.		2.3 STREET ADDRESS 3665 SW 30 Ave	
CITY-ST-ZIP FT. LAUDERDALE FL		2.4 CITY-ST-ZIP Ft. Lauderdale, F 33312	
TITLE D	☒ DELETE	3.1 TITLE	☐ Jition
NAME RICATTI, JUAN C		3.2 NAME	
STREET ADDRESS 1581 EASTLAKE DR.		3.3 STREET ADDRESS	
CITY-ST-ZIP FT. LAUDERDALE FL		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	

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 registered agent 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 as an attachment with an address.

SIGNATURE _____ DATE _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)