

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000196184

Entity Name: VIDA PETS LLC**Current Principal Place of Business:**1451 GOLBAL CT
SARASOTA, FL 34240**Current Mailing Address:**1451 GOLBAL CT
SARASOTA, FL 34240**FEI Number:** 30-0889290**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD #221E
PALM BEACH GARDENS, FL 33410 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title MGR
Name WP&RS ENTERPRISES, LLC
Address 1451 GOLBAL CT
City-State-Zip: SARASOTA FL 34240

Title PRESIDENT
Name WRIGHT, DAVID P.
Address 1451 GLOBAL CT
City-State-Zip: SARASOTA FL 34240

Title CFO
Name STROUD, JOSEPH
Address 1451 GLOBAL COURT
City-State-Zip: SARASOTA FL 34240

Title MGR
Name VIDA HEALTHCARE HOLDINGS LLC
Address 343 PRESTON ST 11TH FL
City-State-Zip: OTTAWA, ON K1S 1N4

Title VP
Name READER, DAVID
Address 1451 GLOBAL COURT
City-State-Zip: SARASOTA FL 34240

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID P. WRIGHT

PRESIDENT

03/04/2016

Electronic Signature of Signing Authorized Person(s) Detail_____
Date