

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000005857

FILED
Jan 09, 2006
Secretary of State

Entity Name: MIAMI ANIMAL HEALTH CORP.

Current Principal Place of Business:

11801 NW 100 ROAD
SUITE 4
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

11801 NW 100 ROAD
SUITE 4
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 65-1070192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENDES, MARTHA
14985 SW 34 STREET
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRENDES, MARTHA
Address: 14985 SW 34 STREET
City-St-Zip: MIAMI, FL 33185

Title: V () Delete
Name: PRENDES, JOSE L
Address: 14985 SW 34 STREET
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE PRENDES

VP

01/09/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date