## 2004 FOR PROFIT CORPORATION - ANNUAL REPORT

## FILED Jan 16, 2004 08:00 AM Secretary of State

1. Entity Nam	MENT # P020001216 BLAIR, D.V.M., P.A.	82				-
ι .	e of Business WOODELVD Q.FL 33021	Mailing Address 4749 HOLLWOODELVD HOLLWOOD, RL 33021		# 200 Million 100 + 22		##
DO NOT WRITE IN THIS SPACE				01122004 No Chg-P CR2E034 (10/03)  4. FEI Number		
1090 KAN	6. Name and Address of Current Re , MARJORIE F ESQ. E CONCOURSE, STE. 202 BOR ISLANDS, FL 33154	DO NOT WRITE IN THIS SPACE				
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOWILL FEE IS \$150.00 After Hay 1, 2004 Fee will be \$550.00  9. Election Campaign Financia Trust Fund Contribution.				.00 May Be led to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLAIR, EVAN M 2340 N.E. 199TH ST. MIAMI, FL 33180	IEU10AS			U0000 01/16/04	0006210 -80025-024 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

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SIGNATURE: