

**2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P10000044087

Entity Name: ALLVETMED.COM, CORP

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9500 NW 79 AVE  
6  
HIALEAH, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

9500 NW 79 AVE  
6  
HIALEAH, FL 33016 US

**New Mailing Address:**

FEI Number: 27-2786742      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VARONA, NELSON  
9500 NW 79 AVE  
6  
HIALEAH, FL 33016 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: VARONA, NELSON  
Address: 9500 NW 79 AVE 6  
City-St-Zip: HIALEAH, FL 33016 US

Title: VP  
Name: COSIO, MIGUEL  
Address: 5629 W 28 AVE  
City-St-Zip: HIALEAH, FL 33016 US

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 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 all other like empowered.

SIGNATURE: MIGUEL COSIO

VP

04/04/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date