

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L81175 (6)

1. Corporation Name

SHARON TIBERIO D.V.M., P.A.



Principal Place of Business

13889 WELLINGTON TRACE  
SUITE A-1  
WELLINGTON FL 33414

Mailing Address

13889 WELLINGTON TRACE  
SUITE A-1  
WELLINGTON FL 33414

3. Date Incorporated or Qualified  
06/12/1990

3a. Date of Last Report  
04/24/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0211893

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

9. Name and Address of Current Registered Agent

TIBERIO, SHARON  
13889 WELLINGTON TRACE  
SUITE A-1  
WELLINGTON FL 33414

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature, typed or printed name of registered agent and the filer, as applicable

(NOTE: Registered Agent Signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

DPV  
TIBERIO, SHARON  
13889 WELLINGTON TRA. A1  
WELLINGTON FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TSC  
TIBERIO, SHARON  
13889 WELLINGTON TRA. A1  
WELLINGTON FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

M  
TIBERIO, SHARON  
13889 WELLINGTON TRA. A1  
WELLINGTON FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Sharon Tiberio

Sharon Tiberio

4-1096

(407) 790.3333

CR2E034 (12/95)