

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L81175

**FILED  
Mar 19, 2016  
Secretary of State  
CC4574843532**

**Entity Name:** SHARON R. TIBERIO, D.V.M., P.A.

**Current Principal Place of Business:**

3304 NE 16TH COURT  
FT. LAUDERDALE, FL 33305

**Current Mailing Address:**

3304 NE 16TH COURT  
FT. LAUDERDALE, FL 33305 US

**FEI Number:** 65-0211893

**Certificate of Status Desired:** No

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

TIBERIO, SHARON RP  
3304 NE 16TH COURT  
FT. LAUDERDALE, FL 33305 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

**Officer/Director Detail :**

Title           DPV  
Name           TIBERIO, SHARON  
Address        3304 NE 16TH COURT  
City-State-Zip: FT. LAUDERDALE FL 33305

Title           TSC  
Name           TIBERIO, SHARON  
Address        3304 NE 16TH COURT  
City-State-Zip: FT. LAUDERDALE FL 33305

Title           MGR  
Name           TIBERIO, SHARON  
Address        3304 NE 16TH COURT  
City-State-Zip: FT. LAUDERDALE FL 33305

*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:** SHARON TIBERIO

**PRESIDENT**

**03/19/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date