# 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000091565

Entity Name: KNOWLES VETERINARY SERVICES, INC.

# **Current Principal Place of Business:**

1000 NW 27 AVE MIAMI, FL 33125

## **Current Mailing Address:**

1000 NW 27 AVE MIAMI, FL 33125

## FEI Number: 46-4224446

### Name and Address of Current Registered Agent:

FELUREN, MARK S 1000 E BROWARD BLVD SUITE 1110 FORT LAUDERDALE, FL 33301 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

### **Officer/Director Detail :**

| Title           | Ρ                 | Title           | D              |
|-----------------|-------------------|-----------------|----------------|
| Name            | WISE, DAVID T     | Name            | BLOCK, JAMES H |
| Address         | 1000 NW 27 AVE    | Address         | 1000 NW 27 AVE |
| City-State-Zip: | MIAMI FL 33125    | City-State-Zip: | MIAMI FL 33125 |
|                 |                   |                 |                |
| Title           | D                 |                 |                |
| Title<br>Name   | D<br>WISE, JANE A |                 |                |
|                 |                   |                 |                |

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: DAVID T WISE

Р

Date

Electronic Signature of Signing Officer/Director Detail

FILED Mar 03, 2015 Secretary of State CC6458874501

Certificate of Status Desired: No