

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000085392

**Entity Name:** WESTON LAKES ANIMAL HOSPITAL LLC

**Current Principal Place of Business:**

318 INDIAN TRACE  
WESTON, FL 33326

**Current Mailing Address:**

10526 SW 52ND STREET  
COOPER CITY, FL 33328 US

**FEI Number:** 46-0829013

**Certificate of Status Desired:** No

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

OGC ASSOCIATES PA  
3275 W HILLSBORO BLVD  
STE 306  
DEERFIELD BEACH, FL 33442 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:** ODIJAS CAMINHA

04/26/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MARKOVA, JITKA  
Address 10526 SW 52ND ST  
City-State-Zip: COOPER CITY FL 33328

Title MGRM  
Name VIOTTI, CHRISTIANO  
Address 1378 SABAL TRAIL  
City-State-Zip: WESTON FL 33327

Title MGRM  
Name VALDES, ANNE  
Address 10526 SW 52ND STREET  
City-State-Zip: COOPER CITY FL 33328

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JITKA MARKOVA

MGRM

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date