FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 454478

(9)

M.W. CHENEY, D.V.M. P.A.

FILED Mar 11 1998 8:00am Secretary of State



B: : 15:				<u> </u>	
Principal Plac		Mailing Address			
5120 NORTH HILLS DRIVE HOLLYWOOD FL 33021		5120 NORTH HILLS DRIV	/E		
		HOLLYWOOD FL 33021		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	ACE
				06/10/1974	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1534968	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State		City & State	**************************************	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the curre	
24	25	29	30		Yes No
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered A	gent
CHENEY, M.W.			81 Name		
5120 NORTH HILLS DRIVE HOLLYWOOD FL 33021			82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
			Oli Deli Addi	reas (r.o. box realines) is real Acceptable)	
			83		
			01 00		
			84 City	Fi.	85 Zip Code
11. Pursuant l	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpose of	changing its registered
office or re agent. Lai	egistered agent, or both, in the State i m familiar with, and accept the oblica	of Florida, Such change was a itions of, Section 607,0505, Flo	authorized by the corporatorida Statutes.	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appo	intment as registered
SIGNATURE	,				
GIONATORE	Signature, typod or printed name of registered agen	st and title diapplicable (NOTE	Registered Agent signature requir	red when reinstating) DATE	
_12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PD OUTNEY MAN	☐ DELETE	1.1 TITLE	{	Change Addition
NAME	CHENEY, M.W.		1.2 NAME		
STREET ADDRESS	5120 NORTH HILLS DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP		
TITLE	VST AND	☐ DELETE	21 TITLE		Change Addition
NAME	CHENEY, M.W.		2.2 NAME		
STREET ADDRESS	5120 NORTH HILLS DRIVE		2.3 STREET ADDRESS		
CITY - ST - ZIP	HOLLYWOOD FL		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		j
CITY-ST-ZIP		<u></u>	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		Ì
CITY-ST-ZIP			5.4 CITY-ST-ZIP]
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		İ
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual roport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the cocioer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an altachment with an adversa.

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Wash W. Ch

D. V. In

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