

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 528673

1. Entity Name

WESTWOOD VETERINARY, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90143 001 ***150.00

Principal Place of Business	Mailing Address
3960 S W 109TH AVE MIAMI FL 33165	3960 S W 109TH AVE MIAMI FL 33165-4428

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	59-1749470	Applied For
		Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARACENA, GERARDO S. 3960 S.W.109TH AVE. MIAMI FL	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---	--

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
<table><tr><td>TITLE</td><td>PD</td><td><input checked="" type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td>CARACENA, GERARDO S.</td><td></td></tr><tr><td>STREET ADDRESS</td><td>3960 S.W.109TH AVE.</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>MIAMI FL</td><td></td></tr></table>	TITLE	PD	<input checked="" type="checkbox"/> Delete	NAME	CARACENA, GERARDO S.		STREET ADDRESS	3960 S.W.109TH AVE.		CITY-ST-ZIP	MIAMI FL		<table><tr><td>TITLE</td><td>PD</td><td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td>ENRIQUE JOSE MARTINEZ</td><td></td></tr><tr><td>STREET ADDRESS</td><td>3960 S.W. 109th AVENUE</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>MIAMI, FLORIDA</td><td></td></tr></table>	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	ENRIQUE JOSE MARTINEZ		STREET ADDRESS	3960 S.W. 109th AVENUE		CITY-ST-ZIP	MIAMI, FLORIDA	
TITLE	PD	<input checked="" type="checkbox"/> Delete																							
NAME	CARACENA, GERARDO S.																								
STREET ADDRESS	3960 S.W.109TH AVE.																								
CITY-ST-ZIP	MIAMI FL																								
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME	ENRIQUE JOSE MARTINEZ																								
STREET ADDRESS	3960 S.W. 109th AVENUE																								
CITY-ST-ZIP	MIAMI, FLORIDA																								
<table><tr><td>TITLE</td><td>ST</td><td><input checked="" type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td>CARACENA, GERARDO S.</td><td></td></tr><tr><td>STREET ADDRESS</td><td>3960 S.W.109TH AVE.</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>MIAMI.FL</td><td></td></tr></table>	TITLE	ST	<input checked="" type="checkbox"/> Delete	NAME	CARACENA, GERARDO S.		STREET ADDRESS	3960 S.W.109TH AVE.		CITY-ST-ZIP	MIAMI.FL		<table><tr><td>TITLE</td><td>ST</td><td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td>ENRIQUE JOSE MARTINEZ</td><td></td></tr><tr><td>STREET ADDRESS</td><td>3960 S.W. 109th AV.</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>MIAMI, FL.</td><td></td></tr></table>	TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	ENRIQUE JOSE MARTINEZ		STREET ADDRESS	3960 S.W. 109th AV.		CITY-ST-ZIP	MIAMI, FL.	
TITLE	ST	<input checked="" type="checkbox"/> Delete																							
NAME	CARACENA, GERARDO S.																								
STREET ADDRESS	3960 S.W.109TH AVE.																								
CITY-ST-ZIP	MIAMI.FL																								
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME	ENRIQUE JOSE MARTINEZ																								
STREET ADDRESS	3960 S.W. 109th AV.																								
CITY-ST-ZIP	MIAMI, FL.																								
<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																							
NAME																									
STREET ADDRESS																									
CITY-ST-ZIP																									

13. I hereby 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 report or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PRESIDENTED 3/22/2000 (305) 553-0033

CR2E034 (9/99)