

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90377 001 ***150.00

00056051

DO NOT WRITE IN THIS SPACE

DOCUMENT # 615613			
1. Entity Name			
FLORIDA VETERINARY LABORATORIES, INC.			
Principal Place of Business		Mailing Address	
12401 W. OLYMPIC BLVD.		12401 W. OLYMPIC BLVD.	
LOS ANGELES, CA 90064		LOS ANGELES, CA 90064	
2. Principal Place of Business		3. Mailing Address	
12401 W. OLYMPIC BLVD.		12401 W. OLYMPIC BLVD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
LOS ANGELES, CA		LOS ANGELES, CA	
Zip	Country	Zip	Country
90064	USA	90064	USA
4. FEI Number		Applied For	
59-1897710		<input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required	
<input type="checkbox"/>			
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM		Name	
1200 SOUTH PINE ISLAND ROAD		Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION, FL 33324		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			
Signature, typed or printed name of registered agent and title if applicable. (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.		10. Election Campaign Financing	
(See criteria on back) <input type="checkbox"/>		Trust Fund Contribution. <input type="checkbox"/>	
FILE NOW!!! FEE IS \$150.00		\$5.00 May Be Added to Fees	
After MAY 1, 2001 Fee will be \$550.00			
Make Check Payable to Department of State			
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PRES/CEO/DIR	ROBERT L. ANTIN		
STREET ADDRESS	12401 W. OLYMPIC BLVD.		
CITY - ST - ZIP	LOS ANGELES, CA 90064-1022		
TITLE	NAME	TITLE	NAME
VP/DIR	NEIL TAUBER		
STREET ADDRESS	12401 W. OLYMPIC BLVD.		
CITY - ST - ZIP	LOS ANGELES, CA 90064-1022		
TITLE	NAME	TITLE	NAME
SEC/DIR	ARTHUR J. ANTIN		
STREET ADDRESS	12401 W. OLYMPIC BLVD.		
CITY - ST - ZIP	LOS ANGELES, CA 90064-1022		
TITLE	NAME	TITLE	NAME
TREASURER/CFO	TOMAS W. FULLER		
STREET ADDRESS	12401 W. OLYMPIC BLVD.		
CITY - ST - ZIP	LOS ANGELES, CA 90064-1022		
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME
TITLE	NAME	TITLE	NAME
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:		TOMAS W. FULLER	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
		Daytime Phone #	
		(310) 584-6500	

CR2E034 (11/00)