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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 691556

GARY A. CARRIER,

| ation Name | 001000 | |
|--------------|-------------|--|
| V A. CARRIER | D.V.M. P.A. | |

(5)

FILED Feb 18 1998 8:00am Secretary of State

| Principal Plac | e of Business | Mailing Address | , | T I TO WHAT OF THE STATE WAS IN A STATE OF THE STATE OF T | BIRKI BIRKI BIRKI BIRKI BIRKI BIRKI 1881 |
|---|--|--|--|--|--|
| 4715 VINCENNES BLVD CAPE CORAL FL 33904 4715 VINCENNES BLVD CAPE CORAL FL 33904 | | | DO NOT WRITE | IN THIS SPACE | |
| | | | | 3. Date Incorporated or Qualified | IN THIS OF AGE |
| | | | | 07/01/1981 | |
| 2. Principal P | lace of Business | 2a, Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 59-2104540 | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | 6. Definitions of Status Bearing | Fee Required |
| City & State | e | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has pai | d the current year Intangible |
| 24 | [25] | | 30 | Personal Property Tax due June | |
| | g. Name and Address of Curre | nt Hegistered Agent | B1 Name | 10. Name and Address of New Rec | Istered Agent |
| | RRIER, GARY A. | | Name | | |
| | 13 S.E. 26TH TERRACE PE CORAL FL 33904 | | 82 Street Add | ress (P.O. Box Number is Not Acceptable | le) |
| 0,0 | | | 83 | | |
| | | | 84 City | | FL 85 Zip Code |
| | to the provisions of Sections 607 050 | 02 and 607 1508 Florida Statute | se the above-named corr | poration submits this statement for the po | |
| | | | | | |
| office or re | egistered agent, or both, in the State | e of Florida. Such change was a | dirionzed by the corporal | tion's board of directors, i hereby accep | t the appointment as registered |
| office or re agent. I a | egistered agent, or both, in the State m familiar with, and accept the oblig | e of Florida, Such change was a pations of, Section 607.0505, Flori | rida Statules. | tition's board of directors, Frieleby accep | the appointment as registered |
| office or re agent. I at SIGNATURE | m familiar with, and accept the oblig | gations of, Section 607.0505, Flo | rida Statutes. | | |
| office or re agent. I at SIGNATURE | m familiar with, and accept the oblig Signature, typed or printed name of registered ag | gations of, Section 607.0505, Flo | rida Statules. Registered Agent signature requi | | DATE |
| office or re agent. I at SIGNATURE | m familiar with, and accept the oblig Signature, typed or printed name of registered ag | gations of, Section 607.0505, Flor | rida Statutes. Registered Agent signature requi | ired when reinstaling) | DATE |
| office or reagent. I as | m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN | pations of, Section 607.0505, Flor nant and talle if applicable (NOTE ND DIRECTORS | rida Statules. Registered Agent signature requi | ired when reinstaling) | DATE ERS AND DIRECTORS IN 12 |
| office or reagent. I at SIGNATURE | m familiar with, and accept the oblig Signature typed or printed name of registered ag OFFICERS AN P CARRIER, GARY A. 2013 S.E. 26TH TERRACE | pations of, Section 607.0505, Flor nant and talle if applicable (NOTE ND DIRECTORS | rida Statules. Registered Agent signature requi 13. 1.1 TITLÉ | ired when reinstaling) | DATE ERS AND DIRECTORS IN 12 |
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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 report 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 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 12 or Block 13 if changed, or or an attachment with an address.

941-549-2949