

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04566

FILED
Jun 16, 2005
Secretary of State

Entity Name: PET EMERGENCY CENTER, INC.

Current Principal Place of Business:

921 E CYPRESS CREEK RD
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

1513 NE 18TH STREET
FORT LAUDERDALE, FL 33305

Current Mailing Address:

921 E CYPRESS CREEK RD
FORT LAUDERDALE, FL 33334

New Mailing Address:

1513 NE 18TH STREET
FORT LAUDERDALE, FL 33305

FEI Number: 59-2037709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAYSON, JOHN C
2400 E OAKLAND PARK BLVD
FT LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

DOCOBO, SUZANNE H CPA
2890 SW 73RD WAY
#1316
DAVIE, FL 33314 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: SUZANNE DOCOBO, CPA

06/16/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUCKLEY, GLENN
Address: 7110 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

Title: VP () Delete
Name: KIRK, LOUISE ANN
Address: 1513 NE 18TH ST
City-St-Zip: FORT LAUDERDALE, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUCKLEY, GLENN
Address: 1513 NE 18TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33305

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUISE ANN KIRK

VP

06/16/2005

Electronic Signature of Signing Officer or Director

Date