2001 UNIFORM BUSINESS REPORT (UBR)

May 23, 2001 8:00 am Secretary of State **DOCUMENT #** F9400005170 05-23-2001 91156 006 ***150 00 1. Entity Name THE PET PRACTICE (FLORIDA), INC. Principal Place of Business 12401 W. OLYMPIC BLVD. 12401 W. (LYMPIC BLVD. LOS ANGELES, CA 90064 LOS ANGELES, CA 90064 00056045 2. Principal Place of Business 12401 W.OLYMPIC BLVD. 3. Mailing Address 12401 W. CLYMPIC BLVD. Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For LOS ANGELES CA LOS ANGELES, 23-2779827 Not Applicable Zip Country Zip Country \$8.75 Additional 90064-1022 90064-1022 5. Certificate of Status Desired USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code Fi 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 FILE NOVIII FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRES/CEO/DIR TITLE TITLE Change Addition ROBERT L. ANTIN NAME NAME STREET ADDRESS 12401 W. OLYMPIC BLVD. STREET ADDRESS CITY - ST - ZIP LOS ANGELES, CA 90064-1022 CITY - ST - ZIP TITLE VP/DIR Defete TITLE Addition Change NAME NEIL TAUBER NAME STREET ADDRESS STREET ADDRESS 12401 W. OLYMPIC BLVD. CITY - ST - ZIP CITY - ST - ZIP LOS ANGELES, CA 90064-1022 TITLE SEC/DIR Delete TITS F Change Addition NAME ARTHUR J. ANTIN NAME 12401 W. OLYMPIC BLVD. STREET ADDRESS STREET ADDRESS CITY - ST - ZIP LOS ANGELES, CA 90064-1022 TREASURER/CFO Detete CITY - ST - ZIP TITLE TITLE Change Addition TOMAS W. FULLER 12401 W. OLYMPIC BLVD. NAME NAME STREET ADDRESS STREET ADDRESS LOS ANGELES, CA 90064-1022 CITY - ST - ZIP CiTY - ST - ZIP TITLE TITLE Delete Сһалде Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP 13. I hereby certify that the information supplied with this filling 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 eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

ttachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TOMAS W.

FULLER

4123/01

310) 584-6500

Daytime Phone #

FILED

STF FL32381F.1

in Block 11 or Block

SIGNATURE: