## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H16659

Entity Name: CORAL REEF ANIMAL CLINIC, INC.

FILED Mar 05, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15301 S. DIXIE HWY. MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

15301 S. DIXIE HWY. MIAMI, FL 33157

FEI Number: 59-2468196 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUSEHOLDER, LAURIE R.
15301 S. DIXIE HIGHWAY
MIAMI, FL 33157
HOUSEHOLDER, LAURIE R DVM
15301 S. DIXIE HIGHWAY
MIAMI, FL 33157

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: LAURIE R HOUSEHOLDER DVM 03/05/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HOUSEHOLDER, LAURIE, R.

Address: 20430 MARLIN RD City-St-Zip: MIAMI, FL

Title: ST () Delete Name: HASSALL, MICHAEL T, Address: 20430 MARLIN RD

City-St-Zip: MIAMI, FL

Title: VP ( ) Delete
Name: HOUSEHOLDER, RUTH A
Address: 15700 SW 85TH AVE

City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition Name: HOUSEHOLDER, LAURIE R DVM

Address: 20430 MARLIN RD City-St-Zip: MIAMI, FL 33189

Title: ST (X) Change ( ) Addition

Name: HASSALL, MICHAEL T Address: 20430 MARLIN RD City-St-Zip: MIAMI, FL 33189

Title: VP (X) Change () Addition

Name: HOUSEHOLDER, RUTH A Address: 15700 SW 85TH AVE City-St-Zip: MIAMI, FL 33157

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: MICHAEL T HASSALL S/T 03/05/2003