FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 26 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-05/26/95--01057--001
****450.00 ****225.00

DOCUMENT # H97562 (3)

1. Corporation Name
INNOVET, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1655 PALM BEACH LAKES BLVD. SUITE 510 WEST PALM BEACH FL 33401	1655 PALM BEACH LAKES BLVD. SUITE 510 WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified: 02/03/1986
3a. Date of Last Report: 06/07/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 59-2699441 — Applied For / Not Applicable

Suite, Apt. #, etc. (22): 910
Suite, Apt. #, etc. (27): 910
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State (23)
City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip (24) / Country (25) / Zip (29) / Country (30)
8. This corporation has liability for intangible tax under S. 199.042 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CIELEWICH, SCOTT P.
1655 PALM BEACH LAKES BLVD.
SUITE 510
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 SUITE 910
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Typed or printed name of registered agent and title if applicable) (New Registered Agent signature required when changed) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	41 TITLE	☒ Change ☐ Addition
NAME	BRAKKE, RON	42 NAME	
STREET ADDRESS	1655 PALM BEACH LAKES BLVD STE 510 910	43 STREET ADDRESS	DELETE
CITY ST ZIP	WEST PALM BEACH FL 33401-2206	44 CITY ST ZIP	
TITLE	STVD	51 TITLE	☒ Change ☐ Addition
NAME	CIELEWICH, SCOTT P.	52 NAME	
STREET ADDRESS	1655 PALM BEACH LAKES BLVD. STE 510 910	53 STREET ADDRESS	SUITE 910
CITY ST ZIP	WEST PALM BEACH FL 33401	54 CITY ST ZIP	
TITLE	D	61 TITLE	☒ Change ☐ Addition
NAME	BOOK, ROBERT	62 NAME	REMOVED DELETE
STREET ADDRESS	1655 PALM BEACH LAKES BLVD. STE 510 910	63 STREET ADDRESS	
CITY ST ZIP	WEST PALM BEACH FL 33401	64 CITY ST ZIP	
TITLE	D	71 TITLE	☒ Change ☐ Addition
NAME	CHOW, JOSEPH C.F.	72 NAME	DELETE
STREET ADDRESS	1655 PALM BEACH LAKES BLVD. STE 510	73 STREET ADDRESS	
CITY ST ZIP	WEST PALM BEACH FL 33401	74 CITY ST ZIP	
TITLE	DC	81 TITLE	☒ Change ☐ Addition
NAME	HENDRICKSON, ROLAND	82 NAME	
STREET ADDRESS	1655 PALM BEACH LAKES BLVD. STE 510 910	83 STREET ADDRESS	SUITE 910
CITY ST ZIP	WEST PALM BEACH FL 33401	84 CITY ST ZIP	
TITLE	D	91 TITLE	☒ Change ☐ Addition
NAME	FRANKLIN, RICHARD M.D.	92 NAME	
STREET ADDRESS	1655 PALM BEACH LAKES BLVD. STE 510 910	93 STREET ADDRESS	SUITE 910
CITY ST ZIP	WEST PALM BEACH FL 33401	94 CITY ST ZIP	

14. I DO hereby certify that the information supplied with this filing is voluntarily furnished and 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 on an attachment with an address.

SIGNATURE: Scott P. Cielewich — 5/17/95 (Date) — 4076878088 (Telephone Number)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
SCOTT P CIELEWICH

0242770 CP