## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J07518

Entity Name: MIRAMAR ANIMAL HOSPITAL, INC.

FILED Mar 16, 2011 Secretary of State

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

4448 HENDRICKS AVENUE SUITE ONE

JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

4448 HENDRICKS AVENUE SUITE 1 JACKSONVILLE, FL 32207

FEI Number: 59-2672630 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:

TROMBERG, FRED
4925 BENCH BLVD
TROMBERG, FRED
4925 BEACH BLVD

JACKSONVILLE, FL F32207 US JACKSONVILLE, FL F32207 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: 03/16/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PTD

Name: LAZAR, DAWNE W Address: 4448 HENDRICKS AVE. City-St-Zip: JACKSONVILLE, FL

Title: VS

Name: LAZAR, STEPHEN F Address: 4448 HENDRICKS AVE. City-St-Zip: JACKSONVILLE, FL

Title: SD

Name: SHIVERS, JONATHAN
Address: 4448 HENDRICKS AVE #1
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: DAWNE LAZAR PTD 03/16/2011