

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# J96571

Entity Name: PET CARE CLINIC, INC.

**FILED**  
**Jun 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

9851 NW 58 ST  
SUITE # 111  
MIAMI, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

9851 NW 58 ST  
SUITE # 111  
MIAMI, FL 33178

**New Mailing Address:**

FEI Number: 65-0013372

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALBERT P. VEGA, C.P.A., P.A.  
2901 LE JUNE ROAD  
SUITE 202  
CORAL GABLES, FL 33134 US

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

ALBERT P. VEGA, C.P.A., P.A.  
306 ALCAZAR AVE  
SUITE 302  
CORAL GABLES, FL 33134 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

06/22/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: SDT  
Name: DIAZ, RICARDO, L  
Address: 9851 NW 58 ST SUITE 111  
City-St-Zip: MIAMI, FL 33178 US

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: RICK L. DIAZ

PRES

06/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date