

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 2, 1995.
AMOUNT DUE ON OR BEFORE 8/2/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # K36353

(6)

95 JUN 29 AM 8:45

1. Corporation Name

DISCOUNT VET SUPPLY, INC.

Principal Place of Business

Mailing Address

270 BUSINESS PARK WAY
STE 2
ROYAL PALM BCH FL 33411
US

270 BUSINESS PARK WAY
STE 2
ROYAL PALM BCH FL 33411
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1988

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0086648

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 10333 SOUTHERN BLVD

26 10333 SOUTHERN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 ROYAL PALM BEACH FL

28 ROYAL PALM BEACH FL

Zip

Country

Zip

Country

24 33411-4338

25 PALM BEACH

29 33411-4338

30 PALM BEACH

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARE, TERRY S.
5967 DUCKWEED RD
LAKE WORTH FL 33467

81 Name

RANSONE, WELFORD D

82 Street Address (P.O. Box Number is Not Acceptable)

10845 ACME RD

83

84 City

W PALM BEACH

FL

85 Zip Code

33414

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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

[Signature]

6/20/95

DATE

12. OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when registering)

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS

TITLE	PTS
NAME	RANSONE, WELFORD D
STREET ADDRESS	10845 ACME RD
CITY, ST, ZIP	W PALM BEACH FL
TITLE	VD
NAME	RANSONE, WELFORD D
STREET ADDRESS	10845 ACME RD
CITY, ST, ZIP	W PALM BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(k), 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 in an attachment with an address.

SIGNATURE:

[Signature]

6/20/95 (407) 790-2201

Date

(Type in Phone #)

CR2E034 (3/95)