2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# K67812

Entity Name: BOCA VILLAGE ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

VILLAGE CORNER STORES #110
6060 SW 18TH STREET
BOCA RATON, FL 33433

New Principal Place of Business:

6060 S.W. 18TH STREET
SUITE 110
BOCA RATON, FL 33433

Current Mailing Address:

VILLAGE CORNER STORES #110
6060 SW 18TH STREET
BOCA RATON, FL 33433

New Mailing Address:

6060 S.W. 18TH STREET
SUITE 110
BOCA RATON, FL 33433

FEI Number: 65-0100992 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOURIZ, LAZARO J
6060 SW 18 ST 110
BOCAVILLAGE ANIMAL HOSPITAL
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

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 — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: MOURIZ, MARY ELIZABE, TH
Address: 2880 NE 14TH ST #909
City-St-Zip: POMPANO BEACH, FL 33062

Title: DVT ( ) Delete
Name: MOURIZ, LAZARO J.,
Address: 2880 NE 14TH ST #909
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LAZARO J. MOURIZ VP 01/06/2006

Electronic Signature of Signing Officer or Director — Date