FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

~~AMMENDED REPORT~~

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

APPROVED AND FILED

95 MAY -4 PM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K82090

1. Corporation Name

Intity-M.L.A.H., Inc.

Principal Place of Business	Mailing Address
3003 Hartley Road Jacksonville, FL 32257	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: 59-2920819 ☐ 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

9. Name and Address of Current Registered Agent

David K. Qualls, D.V.M.
12595 Sweetwater Lane
Jacksonville, Florida 32218

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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: DAVID K. QUALLS, D.V.M. PRESIDENT (Agent signature required when designating) DATE: 5/2/95

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY ST ZIP President David K. Qualls, D.V.M. 12595 Sweetwater Lane Jacksonville, Florida 32218	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP ☐ Change ☒ Addition Vice President Sheila J. Qualls 12595 Sweetwater Lane Jacksonville, FL 32218
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP Treasurer David K. Qualls, D.V.M. 12595 Sweetwater Lane Jacksonville, FL 32218	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP ☐ Change ☒ Addition Secretary Sheila J. Qualls 12595 Sweetwater Lane Jacksonville, FL 32218
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP ☐ Change ☐ Addition

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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: DAVID K. QUALLS, D.V.M. PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/95 (904) 757-9111
Date Daytime Phone #