

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016960

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** MODERN VETERINARY THERAPEUTICS, LLC

**Current Principal Place of Business:**

1550 MADRUGA AVENUE  
SUITE 329  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

18001 OLD CUTLER ROAD  
SUITE 317  
MIAMI, FL 33157

**Current Mailing Address:**

1550 MADRUGA AVENUE  
SUITE 329  
CORAL GABLES, FL 33146

**New Mailing Address:**

18001 OLD CUTLER ROAD  
SUITE 317  
MIAMI, FL 33157

**FEI Number:** 20-3236877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUONG, TU BA  
18301 SW 86 AVENUE  
MIAMI, FL 33157 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CUONG, TU BA  
Address: 18301 SW 86 AVENUE  
City-St-Zip: MIAMI, FL 33157

Title: MGRM  
Name: BEREZAIE, CATHERINE  
Address: 18301 SW 86 AVENUE  
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CUONG TU BA

MGRM

01/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date