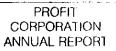
. SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1997	DIVISION OF CO	DRPORATIONS	97 SEP	22 MM 10: 37
DOCUMENT # L53020 (8) 1. Corporation Name NORTHWEST REGIONAL ANIMAL MEDICAL CENTER, INC.				SEGNUTARY OF STATE TALLAMASSEET LORIDA	
.					
Principal Place of Business 7607 EHRLICH RD TAMPA FL 33625		Mailing Addrass 7607 EHRLICH RD TAMPA FL 33625		DO NOT WOITE	E IN THIS SPACE
				3. Date Incorporated or Qualified 02/21/1990	3a. Date of Last Report 05/01/1996
2. Principal Pi	ace of Business	2a, Maifing Address		4. FE! Number 59-3135705	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip 24	Country 25	29 3	Country 30	This corporation owes or has pa Personal Property Tax due June	aid the current year Intangible
9, Name and Address of Current Registered Agent BROOKS, HENRY P., JR., D.V.M. 81 Name				10. Name and Address of New Re	gistered Agent
7607 EHRLICH RD TAMPA FL 33625					
			83 84 City		85 Zip Code
11. Pursuant office or re	o the provisions of Sections 607.0503	and 607.1508, Florida Statutes of Horida, Such chance was a	s, the above-named con	poration submits this statement for the parties board of directors. I hereby access	purpose of changing its registered
CICNIATURE				tion's board of directors. I hereby acce	
12.	Signature, typied or printed name of registered night OFFICERS AND		Registered Agent signature in qui	airco when reinstating) ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12
TITLE	PD	DITETE	1.1 TITLE		Change Addition
NAME	BROOKS, HENRY P., JR.		1.2 NAME		
STREET ADDRESS	7607 EHRLICH RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL	DEFFE	1.4 CHY+S!-ZIP 2.1 THLE	****	(Sagara and Astriction
101LE NAME		<u>[_]</u> [[[[]]	22 NAME		3 0100 0003-E34000 79701043015 55.00 ****165.00
STREET ADDRESS			2 3 STHEFT ADDRESS	*未来 1 f	\$5.00 ****165.00
CITY-ST-ZIP			2 4 CITY-S1-7IP	· · · · · ·	
TITLE		D on the	3.1 TILLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. Crty - \$1 - 7/P		
TITLE		☐ DELEH	4.1 1ACE		☐ Change ☐ Acdition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELLIE	44 CHY-SI-ZIP 5.1 HILE	,	Change Addition
NAME		23	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 C(1Y - S1 - Z(P)		
TITLE		DECE 1E	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	$\mathcal{P}_{\mathcal{P}}$	
STREET ADDRESS		1	G 3 STREET ADDRESS	(1/1)	
1 6,71, 57 7.6		Ri .	6.4.001/2.07.200		,

14. I do hereby certify that the information supplied of the his filing 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 symplemental 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 of the processor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or out an attachment with an arrivers.

9-17.97



CITRUS PARK ANIMAL HOSPITAL, INC. 7607 Ehrlich Road Tampa, Florida 33625-3136

September 17, 1997

FLORIDA DEPARTMENT OF STATE F. D. Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

I am in charge of filing the Corporation Annual Reports for the following:

- 1. Citrus Park Animal Hospital, Inc.
- 2. Animal Taxi. Inc.
- 3. Northwest Regional Animal Medical Center, Inc.
- 4. Sheldon Road Animal & Exotics Hospital. Inc.

We have had business problems with the widening of the highway in front of our office. I have had a heavy load of paper work because of litigation proceedings. We have been working with less staff because of business loss.

I have never been late with the filings and some date back to 1988.

I would very much appreciate the waiving of the late fee.

Połly Sandretzky

Office Manager

Sincerely,