2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81175

Entity Name: SHARON TIBERIO D.V.M., P.A.

FILED Apr 17, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3304 NE 16TH COURT

FT. LAUDERDALE, FL 33305 US

Current Mailing Address: New Mailing Address:

3304 NE 16TH CT 3304 NE 16TH COURT

FT. LAUDERDALE, FL 33305 US FT. LAUDERDALE, FL 33305 US

FEI Number: 65-0211893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TIBERIO, SHARON
3304 NE 16TH CT
TIBERIO, SHARON
3304 NE 16TH COURT

FT. LAUDERDALE, FL 33305 US FT. LAUDERDALE, FL 33305 US

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: SHARON TIBERIO 04/17/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPV () Delete Title: DPV (X) Change () Addition

 Name:
 TiBERIO, SHARON,
 Name:
 TiBERIO, SHARON,

 Address:
 3304 NE 16TH CT
 Address:
 3304 NE 16TH COURT

 City-St-Zip:
 FT. LAUDERDALE, FL 33305
 City-St-Zip:
 FT. LAUDERDALE, FL 33305

Title: TSC () Delete Title: TSC (X) Change () Addition

Name: TIBERIO, SHARON, Name: TIBERIO, SHARON,
Address: 3304 NE 16TH CT Address: 3304 NE 16TH COURT

City-St-Zip: FT. LAUDERDALE, FL 33305 City-St-Zip: FT. LAUDERDALE, FL 33305

 $\label{eq:title:matter} \mbox{Title:} \qquad \mbox{M} \qquad \mbox{() Delete} \qquad \mbox{Title:} \qquad \mbox{M} \qquad \mbox{(X) Change () Addition}$

Name:TIBERIO, SHÀRON,Name:TIBERIO, SHÀRON,Address:3304 NE 16TH CTAddress:3304 NE 16TH COURTCity-St-Zip:FT. LAUDERDALE, FL 33305City-St-Zip:FT. LAUDERDALE, FL 33305

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARON TIBERIO P 04/17/2004