
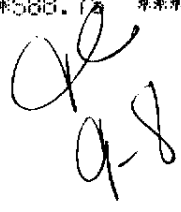



File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000000222			
ANIMAL EYE SPECIALTY CLINIC, L.L.C. 2598 FOREST HILL BOULEVARD WEST PALM BEACH FL 33406		1a. Principal Place of Business Address 2598 FOREST HILL BOULEVARD WEST PALM BEACH FL 33406			
2. Principal Place of Business 3421 Forest Hill Blvd Suite, Apt. #, etc.		2a. Mailing Address 3421 Forest Hill Blvd Suite, Apt. #, etc.		3. Date Organized or Qualified 02/27/1996	
City & State West Palm Beach Fl.		City & State West Palm Beach Fl.		3a. State of Formation FL	
Zip 33406		Zip 33406		4. FEI Number 62-1631405 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Country USA		Country USA		5. Date of Last Report 04/11/1997	
7. Name and Address of Current Registered Agent SKIELNIK, KIM 2598 FOREST HILL BOULEVARD WEST PALM BEACH FL 33406 3421 Forest Hill Boulevard West Palm Beach, Fl. 33406		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code 33406			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	CARASTRO, SUSAN	2598 FOREST HILL BOULEVARD		WEST PALM BEACH FL	
MGRM	SKIELNIK, KIMBERLY	2598 FOREST HILL BLVD		WEST PALM BEACH FL	
				300002636513-7 -09/10/98--01073--001 ****588.75 ****588.75 	

11. I do hereby certify that the information supplied with this 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 is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

 Kimberly A. Skielnik 561-967-5966