## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P00000005857

Entity Name: MIAMI ANIMAL HEALTH CORP.

FILED Jul 29, 2005 Secretary of State

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

1200 N.W. 78TH AVE. 11801 NW 100 ROAD SUITE 104 SUITE 4 MIAMI, FL 33126 MEDLEY, FL 33178

Current Mailing Address: New Mailing Address:

 1200 N.W. 78TH AVE.
 11801 NW 100 ROAD

 SUITE 104
 SUITE 4

 MIAMI, FL 33126
 MEDLEY, FL 33178

FEI Number: 65-1070192 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:

 PRENDES, MARTHA
 PRENDES, MARTHA

 7120 SW 19 ST
 14985 SW 34 STREET

 MIAMI, FL 33155 US
 MIAMI, FL 33185 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: MARTHA PRENDES 07/29/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: PRENDES, MARTHA Name: PRENDES, MARTHA Address: 7120 SW 19 ST Address: 14985 SW 34 STREET

 Address:
 7120 SW 19 ST
 Address:
 14985 SW 34 STREET

 City-St-Zip:
 MIAMI, FL 33155
 City-St-Zip:
 MIAMI, FL 33185

Title: V ( ) Delete Title: V (X) Change ( ) Addition
Name: PRENDES JOSE L Name: PRENDES JOSE L

 Name:
 PRENDES, JOSE L
 Name:
 PRENDES, JOSE L

 Address:
 7120 SW 19 ST
 Address:
 14985 SW 34 STREET

 City-St-Zip:
 MIAMI, FL 33155
 City-St-Zip:
 MIAMI, FL 33185

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: JOSE PRENDES P 07/29/2005