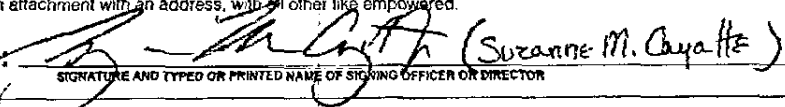


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000010119 1. Entity Name TAMPA BAY VETERINARY DERMATOLOGY, P.A.		
Principal Place of Business 1501-A BELCHER ROAD SOUTH SUITE 1A LARGO, FL 33771 US	Mailing Address 1501-A BELCHER ROAD SOUTH SUITE 1A LARGO, FL 33771 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CAYATTE, SUZANNE M 1501-A BELCHER ROAD SOUTH SUITE 1A LARGO, FL 33771		DO NOT WRITE IN THIS SPACE
6. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		U000000431447 02/23/06-80027-022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAYATTE, SUZANNE M 1501 A BELCHER RD SOUTH STE 1A LARGO, FL 33771	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  (Suzanne M. Cayatte)		Date: 1/12/06 Daytime Phone #: 727-535-3600