2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P00000015879

Entity Name: PEMBROKE PINES ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

130 S. FLAMINGO
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

130 S. FLAMINGO
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 65-0983141 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARRICK, BRIAN
284 FAIRWAY CIRCLE
WESTIN, FL 33326 US

Name and Address of New Registered Agent:

GARRICK, BRIAN
5120 SW 148 AVENUE
SW RANCHES, FL 33330 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: _____ 04/29/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GARRICK, BRIAN
Address: 284 FAIRWAY CIRCLE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GARRICK, BRIAN
Address: 5120 SW 148 AVENUE
City-St-Zip: SW RANCHES, FL 33330

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRIAN GARRICK PRES 04/29/2008
Electronic Signature of Signing Officer or Director — Date