


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90386 005 ***150.00

DOCUMENT # P02000045505
 1. Entity Name
 VETERINARY MOBILE SERVICES, INC.



Principal Place of Business *NEW ADDRESS* Mailing Address
 21001 SW 198 AVE 21001 SW 198 AVE 8232 185TH RD
 MIAMI, FL 33187 MIAMI, FL 33187 LIVE OAK, FL
 8232 185TH RD 32060
 LIVE OAK, FL 32060

DO NOT WRITE IN THIS SPACE



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 03-0444539	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MENA, MARY K
 21001 SW 198 AVE
 MIAMI, FL 33187

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8. 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 _____ DATE _____
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, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MENA, CESAR E 8232 185 TH RD 21001 SW 198 AVE LIVE OAK, FL 32060 MIAMI, FL 33187
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MENA, MARY K 8232 185 TH RD 21001 SW 198 AVE LIVE OAK, FL 32060 MIAMI, FL 33187
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Cesar E. Mena* CESAR E. MENA PRES. 3-07-07 786-258-2688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #