

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025056

FILED
Feb 10, 2006
Secretary of State

Entity Name: SUNSET PET HOSPITAL, INC.

Current Principal Place of Business:

15875 SW 61 STREET
MIAMI, FL 33143

New Principal Place of Business:

8579 NW 186 ST
MIAMI, FL 33015

Current Mailing Address:

15875 SW 61 STREET
MIAMI, FL 33143

New Mailing Address:

8579 NW 186 ST
MIAMI, FL 33015

FEI Number: 20-0889862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRUJILLO, NICOLE C
7350 S.W. 75TH AVE.
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CABALLERO, RICARDO T
Address: 15875 SW 61 STREET
City-St-Zip: MIAMI, FL 33143 US

Title: VPD () Delete
Name: PEREZ, IVAN A
Address: 8425 SW 155TH TERRACE
City-St-Zip: PALMETTO BAY, FL 33157 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CABALLERO, RICARDO T DVM
Address: 15875 SW 61 STREET
City-St-Zip: MIAMI, FL 33143 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RICARDO T. CABALLERO, DVM

PD

02/10/2006

Electronic Signature of Signing Officer or Director

_____ Date