

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000025056

**FILED**  
**Jan 26, 2011**  
**Secretary of State**

**Entity Name:** SUNSET PET HOSPITAL, INC.

**Current Principal Place of Business:**

8579 NW 186 ST  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

8579 NW 186 ST  
MIAMI, FL 33015 US

**New Mailing Address:**

**FEI Number:** 20-0889862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** CABALLERO, RICARDO T DVM  
**Address:** 8579 NW 186 ST  
**City-St-Zip:** MIAMI, FL 33015 US

I hereby 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 all other like empowered.

**SIGNATURE:** RICARDO T. CABALLERO, DVM

PD

01/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date