

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000053419

Entity Name: VETSMARK, INC.

FILED  
Feb 27, 2006  
Secretary of State

## Current Principal Place of Business:

4951 BRENNMAN PARK DRIVE, UNIT 202  
ALEXANDRIA, VA 223047797

## New Principal Place of Business:

854 BLUE SAGE STREET  
UNIT 303  
CELEBRATION, FL 34747

## Current Mailing Address:

4951 BRENNMAN PARK DRIVE, UNIT 202  
ALEXANDRIA, VA 223047797

## New Mailing Address:

PO BOX 470865  
CELEBRATION, FL 34747 US

FEI Number: 20-2712478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.  
STE. E, 773 4TH AVE., NORTH  
NAPLES, FL 34102 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: DP ( ) Delete  
Name: ZAKRZESKI, ALEX  
Address: 4951 BRENNMAN PARK DRIVE, UNIT 202  
City-St-Zip: ALEXANDRIA, VA 223047797

Title: DST ( ) Delete  
Name: RIVERS, LARRY W. SR.  
Address: 4951 BRENNMAN PARK DRIVE, UNIT 202  
City-St-Zip: ALEXANDRIA, VA 223047797

Title: D ( ) Delete  
Name: RIVERS, JUDY K.  
Address: 4951 BRENNMAN PARK DRIVE, UNIT 202  
City-St-Zip: ALEXANDRIA, VA 223047797

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ZAKRZESKI, ALEX  
Address: 854 BLUE SAGE STREET, UNIT 303  
City-St-Zip: CELEBRATION, FL 34747

Title: DST (X) Change ( ) Addition  
Name: RIVERS, LARRY W. SR.  
Address: 854 BLUE SAGE STREET, UNIT 303  
City-St-Zip: CELEBRATION, FL 34747

Title: D (X) Change ( ) Addition  
Name: RIVERS, JUDY K.  
Address: 854 BLUE SAGE STREET, UNIT 303  
City-St-Zip: CELEBRATION, FL 34747

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: LARRY W. RIVERS, SR.

DST

02/27/2006

Electronic Signature of Signing Officer or Director

Date