

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041746

FILED
Jan 17, 2012
Secretary of State

Entity Name: ANIMAL HOSPITAL OF UNIVERSITY DRIVE, PA

Current Principal Place of Business:

2585 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

3744 PEBBLEBROOK MANOR
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 26-2481930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAUL R. ALFIERI, P.L.
5143 NW 42 TERRACE
COCONUT CREEK, FL 33073 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: DPT
Name: ANSARA, CARL
Address: 3744 PEBBLEBROOK MANOR
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: DVPS
Name: ANSARA, RACHEL
Address: 3744 PEBBLEBROOK MANOR
City-St-Zip: COCONUT CREEK, FL 33073

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: CARL ANSARA

PRES

01/17/2012

Electronic Signature of Signing Officer or Director

Date