2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000042049

GERÁRDO VIZCARRONDO, D.V.M., P.A.



FILED Jan 29, 2007 08:00 AM Secretary of State

Principal Place of Business

886 CHAPEL ST

OVIEDO, FL 32765 US

Mailing Address

886 CHAPEL ST

OVIEDO, FL 32765



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DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTOR

01222007	No Chg-P	CR2E034 (11/05)	
4 CEL Numbro		Applied Fo	-

59-3248301

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Daylime Phone &

6. Name and Address of Current Registered Agent

VIZCARRONDO, GERARDO 3440 WILD EAGLE RUN **OVEIDO, FL 32765**

SIGNATURE:

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the obligat	ions of registered agent.					
SIGNATURE.	Signature typed or printed name of registered agen) and title	il applicable (NOTE: Republered Adent	signature	required when reinstating)	DATE	
						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
HILE NAME STREET ADDRESS CITY-SI-ZIP	D VIZCARRONDO, GERARDO 886 CHAPEL ST OVEIDO, FL 32765					
TITLE NAME STREET ADDRESS CITY-SI-ZIP			U00000606895 01/31/07-80016-004 150.00			
TITLE NAME STREET ADDRESS CITY-SI-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CHY-ST-ZIP						
TITLE NAMI STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STHEET ADDRESS CHY-ST-ZIP					·	
12. I hereby of indicated of the corchanged,	certify that the information supplied with this f on this report or supplemental report is the poration or the receiver of trustee emiliowers or on an attachment with an address with a	iling does not qualify for the exemption and accurate and that my signature of the execute this report as required by Lother like empowered	ns cor nall hav Chap	ntained in Chapter 119 ve the same legal effecter 607, Florida Statute	P. Florida Statutes. I further certify that the information as a filmade under oath, that I am an officer or director is, and that my name appears in Block 10 or Block 11 if	

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