FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000066830 (8) DOCUMENT # MARGARET NEWMAN-BIGGS, DVM, P.A.

Principal Place of Business

Mading Address

FILED Mar 30 1998 8:00am Secretary of State



12798 W FOREST HILL BLVD 12798 W FOREST HILL BLVD WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/31/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0515047 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **NEWMAN-BIGGS. MARGARET** 12798 W FOREST HILL BLVD 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33414 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typind or printed name of registered agent and tile it applicable (NOTF: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (1097 DPVS DELETE Change Addition TITLE 1.1 TITLE **NEWMAN-BIGGS, MARGARET** NAME 1.2 NAME 14858 EQUESTRIAN WAY STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 14 CITY-ST-7IP CITY - ST- ZIP TITLE DELETE Change Addition 2.1 TITLE **NEWMAN-BIGGS, MARGARET** NAME 2.2 NAME 14858 EQUESTRIAN WAY STREET ADDRESS 2.3 STREET ADDRESS **WEST PALM BEACH FL 33414** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS

CITY-ST-ZIP

NAME

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DELETE

3-24-98

561-798-1900

Change

Addition