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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000091892 (7)

SCHENHOLM VETERINARY CLINIC, INC.

Principal Place of Business Mailing Address

571 N.E. 44TH STREET 571 N.E. 44TH STREET
FORT LAUDERDALE FL 33334 FORT LAUDERDALE FL 33334-3101
US

FILED Apr 07 1997 8:00am Secretary of State



Suite, Apt. #, etc Suite, Apt. #, etc City & State Size Country Size Siz							3. Date Incorporated or Qualified 12/19/1994 3a. Date of Last Report 05/01/1996		
Section Sect							1 1 (ppinou i o		
City & State 27	21 26						65-0553189 Not Applicable		
23	L						5 Certificate of Status Desired S8.75 Additional		
28							Fee Required		
Summaria of the provisions of Socians 607 0507 and 607.1508, Florida Statutes Marriage Marria	· · · · · · · · · · · · · · · · · · ·						6. Election Campaign Financing \$5.00 May Be		
Power and Address of Current Registered Agent S. Name and Address of Current Registered Agent EDWARDS, GEORGE E ESQ. 95 NORTH FEDERAL HIGHWAY, #112 POMPANO BEACH FL 33082 84 City Fired Address (P.O. Box Number is Not Acceptable) 85 Sireet Address (P.O. Box Number is Not Acceptable) 86 Sireet Address (P.O. Box Number is Not Acceptable) 87 Sireet Address (P.O. Box Number is Not Acceptable) 88 Sireet Address (P.O. Box Number is Not Acceptable) 89 Sireet Address (P.O. Box Number is Not Acceptable) 80 Sireet Address (P.O. Box Number is Not Acceptable) 80 Sireet Address (P.O. Box Number is Not Acceptable) 81 Sireet Address (P.O. Box Number is Not Acceptable) 82 Sireet Address (P.O. Box Number is Not Acceptable) 83 Sireet Address (P.O. Box Number is Not Acceptable) 84 City File Sireet Address (P.O. Box Number is Not Acceptable) 85 Zip Code 86 City Sireet Address (P.O. Box Number is Not Acceptable) 86 Zip Code 87 Sireet Address (P.O. Box Number is Not Acceptable) 87 Sireet Address (P.O. Box Number is Not Acceptable) 88 Zip Code 89 Sireet Address (P.O. Box Number is Not Acceptable) 89 Zip Code 80 Sireet Address (P.O. Box Number is Not Acceptable) 80 Zip Code 80 Zip Code 80 Zip Code 80 Zip Code 81 Sireet Address (P.O. Box Number is Not Acceptable) 80 Zip Code 81 Sireet Address (P.O. Box Number is Not Acceptable) 80 Zip Code 81 Sireet Address (P.O. Box Number is Not Acceptable) 82 Zip Code 83 Zip Code 84 City Sireet Address (P.O. Box Number is Not Acceptable) 85 Zip Code 86 Zip Code 86 Zip Code 87 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 80 Zip Code 8	23					***************************************	Trust Fund Contribution Added to Fees		
10. Name and Address of Ourrant Registered Agent 10. Name and Address of New Registered Agent 10. Name and Name		·	Zip	Cou	ntry				
BT Name									
Signature 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 algent. I are former with an accept the displacence of Sections 607 0505, Provide Statutes, the above-named corporation submits this statement for the purpose of changing its registered algent. I are former with an accept the displacence of Section 607 0505, Provide Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. THE STARRES CITY 51-79 15. THE AUDIENDALE FL 33334 16. CHANGES 17. STARRES AND CITY 51-79 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. SCHENHOLM, CARL 571 N.E. 44TH STREET FORT LAUDERDALE FL 33334 16. Change Addition 17. STARRES AND CITY 51-79 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 29. AMME 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I		***************************************	ent Registered Agent				10. Name and Address of New Registered Agent		
POMPANO BEACH FL 33062 11. Pursuant to the perovisions of Sections 607 0500 and 607 1508. Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered agent or hold in the State of Frontial Statutes, the above-harmed corporations submits this statement for the purpose of changing its registered agent it am familiar with, and accept the obligations of Sections 607 6505. Florida Statutes SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO	950 NORTH FEDERAL HIGHWAY, #112					82 Street Address (P.O. Box Number is Not Acceptable)			
POMPANO BEACH FL 33062 88 City FL ST Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered agent. I can framitiar with, and accept the obligations of Sections 8007.0502 and 607.1508. Florida Statuties SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SOFT COFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. AUTHORIST SIGNATURE SCHENHOLM, CARL 57 IN.E. 44TH STREET FORT LAUDERDALE FL 33334 DELETE 1.3 STREET ADDRESS CITY-S1-2P IN.E. 1.4 THILE 1.5									
11. Pursuant to the provisions of Socions 607 0500 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent at the fastile of Frontia. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent and not applicable. Signature Note Not									
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutas, the above-named corporation submits this statement for the purpose of changing its registered algent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutos SIGNATURE Spring a prevention of development as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutos SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11.1 TITLE D					83				
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SIGNATURE	office or r agent. La	registered agent, or both, in the Stat im familiar with, and accept the oblid	e of Florida. Such change was nations of Section 607 0505. F	authorized Iorida Stat	d by	the corporat	ation's board of directors. I hereby accept the appointment as registered		
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 IT	SIGNATURE	Signature typic or printed name of registered as	gent and bild if applicable. (NO	ITE Registered	Ape	ent signature requi	vired when reinstaling) DATE		
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CITY - ST - ZiP 64 CITY - ST - ZIP	STREET ADORESS			6.3 ST	REET	ADDRESS			
	CITY - ST - 7HP			6.4 CI	TY-S	T-ZIP			

4. I do hereby 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 in authorized.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/97 954-491-4643