FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1. Corporation	MENI # P950	00051695 (1)			
•	UNT VET SERVICES, INC	• •	•			
5,000	0141 421 021141020; 1140	•			A LEGARAGE REG AND A CONTRACT COLOR CONTRACT CONTRACT	ANA: HAN BINE JANAH ANIH HARI
Principal Place	of Business	Mailing Address				
Principal Place of Business		-	-			
10333 SOUTHERN BOULEVARD ROYAL PALM BEACH FL 33411			10333 SOUTHERN BOULEVARD ROYAL PALM BEACH FL 33411			
					3. Date Incorporated or Qualified 3a. Da	ite of Last Report
A D1 1 1D				· · · · · · · · · · · · · · · · · · ·	06/29/1995	
2. Principal Pk 21	ace of Business	2a. Mailing Address			4. FEI Number 65 - 059 1941	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27	······································		5. Certificate of Status Desired	Fee Required
City & State)	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability in intangible	
24	25 29 30 9, Name and Address of Current Registered Agent		30		Florida Statutes Yes No	
	9, Name and Address of Curi	rent Hegistered Agent	8	1 Name	10. Name and Address of New Registered	d Agent
RANSON	IE, WELFORD D DVM		8		ress (P.O. Box Number is Not Acceptable)	
	OUTHERN BOULEVARD		Ľ	Z Street Addr	ress (F.O. Box Number is Not Acceptable)	
ROYAL F	PALM BEACH FL 33411		8	3		
			8	4 City	F	85 Zip Code
11. Pursuant t	o the provisions of Sections 607.05	i02 and 607.1508, Florida Statute	es, the above	-named corpor	ration submits this statement for the purpose of c	hanging its registered office
or register	ed agent, or both, in the State of FI th, and accept the obligations of, Se	onda. Such change was authoriz	ed by the co	rporation's boa	rd of directors. I hereby accept the appointment a	s registered agent. I am
SIGNATURE _						
12.	Signature typed or printed name of registered as OFFICERS A	yent and little if apylicable (NO AND DIRECTORS	TE: Registered Ag	ent signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TIFLE	D DELETE		1. 1 TITL	E	NOOTHONG OF INTOCK TO OF TOLENOW!	Change Addition
NAME	RANSONE, WELFORD D D	VM .	1.2 NAM	E		
STREET ADDRESS 10333 SOUTHERN BOULEVARD			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	ROYAL PALM BEACH FL 3		1.4 CITY			5.6 5.00
TITLE	☐ DELETE		2 1 TITL		÷	Change Addition
NAME STREET ADDRESS	proc		2.2 NAME 2.3 STREET ADDRESS			
COY-ST-ZIP			23 STRE			
TITLE			3. 1 TITLE			Change Addition
NAME	ΛĖ		3.2 NAMI			
STREET ADDRESS			3.3. STRE	ET ADDRESS		
CITY-ST-ZIP			3.4 CITY	-ST-ZIP		
THILE	ILE DELETE		4. 1 Title	:		☐ Change ☐ Addition
NAME			4.2 NAME	£]		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CHTY-ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE	DELETE 5.		5. 1 TITLE	E		☐ Change ☐ Addition
NAME			5.2 NAM			
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TATLE		DELETE.	6. 1 TITLE			Change Addition
NAM!			6.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			64 CITY-	ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 akachment with an address. SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYS ONE 124/96 (9-7) 790-2261