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

P95000051695 (1) DOCUMENT #

DISCOUNT VET SERVICES, INC.

Principal Place of Business Mailing Address						E INNIEME IIA 1818 I ANIE ANIE ANIE ANIE ANIE ANIE ANIE AN	1997 11918 91119 1	(6161 61N 166)	
	ERN BOULEVARD BEACH FL 33411		10333 SOUTHERN BOULEVARD ROYAL PALM BEACH FL 33411			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	JOFACE		
						06/29/1995			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	/	Applied For	
Suite, Apt. #, etc.		26	Suite, Apt. #, etc.			65-0591941		Not Applicable \$8.75 Additional	
		Suite, Apt. #, etc				5. Certificate of Status Desired			
22		27				G. Constitute of States States		Required	
City & State		City & State	City & State 28			6. Election Campaign Financing \$5.00 Mat Trust Fund Contribution Added to Fi			
Zip	Country	Zip		Country		8. This corporation owes or has paid the o	urrept year I	ntangible	
24	25	29	30			Personal Property Tax due June 30.		□ No	
9, Name and Address of Current Registered Agent						10. Name and Address of New Registere	d Agent		
	NSONE, WELFORD D DVM			81	Name				
10333 SOUTHERN BOULEVARD				82	82 Street Address (P.O. Box Number is Not Acceptable)				
RO	yal palm beach fl 3341	1			ļ				
				63					
				84	City	F	85 Zip	p Code	
office or re		State of Florida, Such change	was author	rized by	the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing		
SIGNATURE	Signature, typed or printed name of register		(NOTE DATE			ired when reinstaling) DATE			_
12.		S AND DIRECTORS		13.	ant signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12	
TITLE	D	DELET		1.1 TITLE			Change		ion
NAME	RANSONE, WELFORD D	DVM	1	.2 NAME					
STREET ADDRESS	10333 SOUTHERN BOUL	.EVARD	1	.3 STREET	ADDRESS				
CITY-ST-ZIP	ROYAL PALM BEACH FL	33411	1.4 CITY		IT-ZIP				
TITLE		DELET	E 2	2.1 TITLE			☐ Change	Addit	ion
NAME			2	.2 NAME	}				
STREET ADDRESS			2	.3 STREET	ADDRESS				
CITY-ST-ZIP			2	4 CITY	ST-ZIP				
TITLE		☐ DELET	£ 3	.1 TITLE			Change	e 🔲 Addit	ion
NAME			3	.2 NAME					
STREET ADDRESS			j 3	.3 STREET	ADDRESS				
CITY-ST-ZIP				.4. CITY-	ST-21P				
TITLE		DELET	E 4	. I TITLE			Change	Addit	tion

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 an attachment with an address.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

52 NAME 5 3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

NAME

TITLE NAME

TITLE

NAME

STREET ADDRESS CITY - ST - ZIP

STREET ADDRESS CITY-S1-ZIP

STREET ADDRESS

WELFORD D. RANSONE 4/25/25 561-793-6697

Change

Change

___ Addition

Addition

FILED

Apr 29 1998 8:00am

Secretary of State

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