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

DOCUMENT #

1. Corporation Name

P95000091271 (3)

THE PET VET NETWORK, INC.

Principal Place	e of Business	Mailing Address				JURE DIRING PERSON NAME	AND AND AND C
540 CARILLON PARKWAY. #1112		533 S. HOWARD AVENUE, #8-33					
ST. PETERSBURG FL 33606		TAMPA FL 33606		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					11/30/1995		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	pplied For
21 26			4 -1-		59-3363010		ot Applicable
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.	¬ '''		5. Certificate of Status Desired		Additional leguired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23	-	28			Trust Fund Contribution		to Fees
Zip	Country	Zıp	Country	'	8. This corporation owes or has paid the o		
24	25	29 3	0		Personal Property Tax due June 30.		\$ 100
Name and Address of Current Registered Agent				Name	10. Name and Address of New Registere	a Agent	
	ITE, DANIEL T ESQ.	1111 98th Torra	.0L 81				
	CORAL REEF DRIVE 1304	l N.W. 98th Tevro resville, FL 3260	82	Street Add	dress (P.O. Box Number is Not Acceptable)		
I-An	APA FL 33802 GOLV	result 17L 3260	6 83				
			84	City		. 85 Zip	Code
			'	,	F		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above	e-named cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing i	its registered
agent. La	m familiar with, and accept the oblig	ations of Section 607.0505, Florid	da Statutes	S.	along board or circulation vivores, assept and	alaa	
SIGNATURE	- Auux I				<u>oja</u>	8/98	
40	Signature: typed of printed name of rigibused ago OFFICERS AN		Registered Age	ent signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	BS IN 12
12.	OC OF TOERS ALL	DELETE	1.1 TITLE	 -T	Noothord of Marco	☐ Change	Addition
NAME	WHITE, DANIEL T	1.2 N			1 2018 Tax	40	
STREET ADDRESS	745 CORAL REEF DR		1.3 STREET	ADDRESS	1304 N.W. 98m Leva	رعي	
CITY-ST-ZIP	TAMPA FL 33602		1.4 CITY-ST-ZIP		1304 N.W. 98th Terra Gainesville, FL 326	06	
TITLE			2.1 TITLE	ľ		■ Change	Maddition
NAME	WEBER, MARK		2.2 NAME				
STREET ADDRESS	3206 162ND PL.		2.3 STREET	ADDRESS			
CITY-ST-ZIP	BELLEVUE WA 98008		2. 4 CITY -	ST-ZIP		Change	Addition
TITLE	DP	☐ DELETE	3.1 TITLE			Change	☐ ¥ûûiliû∏
NAME	D'ONOFRIO, JOHN	1440	3.2 NAME	ADDDECC			
STREET ADDRESS	540 CARILLON PARKWAY, #	1112	3.3 STREET				
CITY-ST-ZIP TITLE	ST. PETERSBURG FL 33606	DELETE	3.4. CITY - 5 4.1 T(T).E	SI-ZIP		Change	Addition
NAME			4. 2 NAME	1			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY - ST - ZIP			5.4 CITY - S	T-ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS	`.		6.3 STREET	ADDRESS			
I	1						

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 house 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.

FILED

Mar 05 1998 8:00am

Secretary of State