SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000053600

FILED Jul 21, 1999 8:00 am Secretary of State

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INTRAC	OASTAL ANIMAL HOSPITA	AL, P.A.		/		
Principal Place	e of Business	Mailing Address	_		ם נווכם וונדם וונום בנוםו פוו ופסיוחם: ו	IIII OOTA ARIOO OTIIC OTIIC OTIIC ISSA
18175 SE FEDERAL HIGHWAY TEQUESTA FL 33469 18175 SE FEDERAL HIGHW TEQUESTA FL 33469					DO NOT WRITE IN	THIS SPACE
					Date incorporated or Qualified 06/24/1996	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	-		65-0690703	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional
22		27	27		5. October of Charles Desired	Fee Required
City & State	te	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution L	Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current ye	
24	25	29	30		Intangible Personal Property. 10. Name and Address of New Regist	
	9. Name and Address of Curre	int Registered Agent		81 Name	10. Name and Address of New Negla-	tered Agent
CR/	AFT, DAVID W					
	18 POINSETTIA AVE			82 Street Address (P.O. Box Number is Not Acceptable)		
WE:	ST PALM BEACH FL 33407		ŀ	83		
			[
				84 City		FL 85 Zip Code
office or a gent, I a	registered agent, or both, in the Stat am familiar with, and accept the obliq	e of Florida. Such change v	was authorized	by the corporati	oration submits this statement for the purpose tion's board of directors. I hereby accept the	e of changing its registered appointment as registered
office or	registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida. Such change of gations of, section 607.050	was authorized 5, Florida Statu	by the corporati	tion's board of directors. I hereby accept the	e of changing its registered appointment as registered
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14. I hereby cartify 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.

561-746-0308