2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2004
Secretary of State

DOCUMENT# P98000006444

Entity Name: ANDES ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

1019 N. HIGHLAND AVE.
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

1019 N. HIGHLAND AVE.
LARGO, FL 33770

New Mailing Address:

FEI Number: 59-3486966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOLINA - BRISSON, JUAN C
12707 CHECHE PLACE
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

MOLINA - BRISSON, JUAN C
1992 ARVIS CR E
CLEARWATER, FL 33764 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JUAN C MOLINA-BRISSON 07/14/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MOLINA - BRISSON, JUAN C
Address: 1992 ARVIS CIR E
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete
Name: MOLINA, GABRIELA M
Address: 1992 ARVIS CIR E
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: MOLINA - BRISSON, JUAN C
Address: 1992 ARVIS CIR E
City-St-Zip: CLEARWATER, FL 33764

Title: DR (X) Change ( ) Addition
Name: MOLINA, GABRIELA M
Address: 1992 ARVIS CIR E
City-St-Zip: CLEARWATER, FL 33764

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN C MOLINA-BRISSON DR 07/14/2004
Electronic Signature of Signing Officer or Director Date