## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P98000024473**

ALTON ROAD ANIMAL HOSPITAL JON J. RAPPAPORT,

Principal Place of Business

1828 ALTON ROAD MIAMI BEACH, FL 33139 Mailing Address

19501 BISCAYNE BLVD #400 AVENTURA, FL 33180



02-05-2007 90080 006 \*\*\*150.00

40009961



DO NOT WRITE IN THIS CRACE	01242007 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE	4. FEI Number Applied For
	65-0821135 Not Applicable
*	Certificate of Status Desired
6. Name and Address of Current Registered Agent	
SOFFER, MARSHA 19501 BISCAYNE BLVD	DO NOT WRITE

#400 IN THIS SPACE AVENTURA, FL 33180

the obliga	ations of registered agent.		· ·
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
	LE NOW!!! FEE IS \$150.00 Ray 1, 2007 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees	
10.	OFFICERS AND DIRE	CTORS	
TITLE	D		

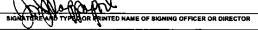
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept

RAPPAPORT, JON J D.V.M. NAME 19501 BISCAYNE BLVD., #400 STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33180 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



Date

Daytime Phone #