2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2010
Secretary of State

DOCUMENT# P99000001660

Entity Name: SOUTH FLORIDA VETERINARY SURGICAL SERVICES, INC.

Current Principal Place of Business:

372 S. POWERLINE ROAD
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

624 NORTHEAST 17TH AVENUE
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-0886408 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLTSINGER, ROBIN H DVM
624 NORTHEAST 17TH AVENUE
FT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

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: _____

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: PSD
Name: HOLTSINGER, ROBIN H DVM
Address: 624 NORTHEAST 17TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33304

Title: PSD
Name: HOLTSINGER, ROBIN R DVM
Address: 624 NE 17TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: PSD
Name: HOLTSINGER, ROBIN R DVM
Address: 624 NE 17TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: PSD
Name: HOLTSINGER, ROBIN H DVM
Address: 624 NE 17TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

I hereby 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 all other like empowered.

SIGNATURE: ROBIN HOLTSINGER PRES 05/07/2010

Electronic Signature of Signing Officer or Director Date