2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 30, 2007 8:00 am Secretary of State DOCUMENT # \$40968 04-30-2007 90385 038 ***150.00 GARY L. BARSCH, D.V.M., P.A. Principal Place of Business Mailing Address 9999 PLANTATION BLVD TAMPA FL 33624 9999 PLANTATION BLVD TAMPA FL 33624 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-3061654 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARSCH, GARY L. Street Address (P.O. Box Number is Not Acceptable) 9999 PLÁNTATION BLVD TAMPA FL 33624 City Zip Code 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 the obligations of registors of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HHI □ Defete 11111 ☐ Change ☐ Addition BARSCH, GARY L NAMI NAME 9999 PLANTAION BLVD STREET ADDRESS STREET ADORESS **TAMPA FL 33624** CITY-S1-ZIP CITY ST-7IP 11115 ☐ Defete TITLE ☐ Change ■ Addition GARCIA, GARY NAME NAMI 9999 PLANTATION BLVD STREET ADDRESS STREET ADDRESS TAMPA FL 33624 CITY - ST - ZIP CITY-ST-7IP Deligio Addition BARSCH, DIANA L NAME NAME 9999 PLANTATION BLVD. STRUCT ADDRESS STREET ADDRESS CHY-ST-7IP **TAMPA FL 33624** CITY S1-7IP ☐ Delete TITLE ☐ Change Addition BARSCH, FREDERICK C NAME NAME 9999 PLANTATION BLVD STREET ADDRESS STREET ADDRESS **TAMPA FL 33624** CHY-ST-7IP CITY ST-7IP HIU. ☐ Delete ШЦ ☐ Change Addition YOUNG-LAPLANT, REBECCA NAME NAMi 9999 PLANTATION BLVD STREET ADDRESS STREET ADDRESS **TAMPA FL 33624** CITY - S1 - ZIP CITY-ST-ZIP THELE □ Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. 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.

FILED

Date

Daytime Phone ≥