


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State


DOCUMENT # S86698
1. Entity Name
**MARIO OBSTBAUM D.V.M. AND DANA
HARMAN-OBSTBAUM D.V.M., P.A.**



Principal Place of Business
**COMPANION ANIMAL HOSP.
11401 C.W. PALMETTO PK RD
BOCA RATON, FL 33428 US**

Mailing Address
**11401-CW PALMETTO PARK RD
BOCA RATON, FL 33428 US**

DO NOT WRITE IN THIS SPACE



04252004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0287964	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**OBSTBAUM, MARIO
11401-C W PALMETTO PARK RD
BOCA RATON, FL 33428**

**DO NOT WRITE
IN THIS SPACE**

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 registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when retaining)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5,00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OBSTBAUM, MARIO 11401-C W PALMETTO PARK RD BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HARMAN-OBSTBAUM, DANA 11401-C W PALMETTO PARK RD BOCA RATON, FL 33428
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04/29/04-80100-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ **5011**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Mario Obstbaum 4/26/04 488-7555**
Disc Daytime Phone #