2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S86701

FILED Mar 20, 2007 Secretary of State

Entity Name: BRAVO VETERINARY CLINIC, INC. **Current Principal Place of Business: New Principal Place of Business:** 10901 QUAIL ROOST DR MIAMI, FL 33157 **Current Mailing Address: New Mailing Address:** 10901 QUAIL ROOST DR MIAMI, FL 33157 FEI Number: 65-0330381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANCINE E TEGZES CPA 8925 SW 148 STREET #200 MIAMI, FL 33176 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition FERNANDEZ-BRAVO, JUA, N.C. Name: Name: 135 HAMPTON LANR Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: Title: VPT () Delete Title: () Change () Addition Name: FERNANDEZ, MARIA E Name: 135 HAMPTON LANE Address: Address: KEY BISCAYNE, FL 33149 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 FERNANDEZ BRAVO PS 03/20/2007