

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M43451

Entity Name: WESTBIRD ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

11439 SW 40 STREET
MIAMI, FL 33165

Current Mailing Address:

11439 SW 40 STREET
MIAMI, FL 33165

FEI Number: 59-2746764

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, LISARDO J. JR.
7365 S.W. 118 COURT
MIAMI, FL 33183 US

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

Officer/Director Detail :

Title	P	Title	S
Name	MARTINEZ, LISARDO J., JR	Name	MARTINEZ, CARMEN R.
Address	7365 S.W. 118 COURT	Address	7365 S.W. 118 CT.
City-State-Zip:	MIAMI FL 33183	City-State-Zip:	MIAMI FL 33183

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: LISARDO MARTINEZ

PRESIDENT

01/15/2018

Electronic Signature of Signing Officer/Director Detail

Date