

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133783

Entity Name: FLORIDA VETERINARY REFERRAL CENTER & 24 HOUR
EMERGENCY AND CRITICAL CARE, INC.**FILED**
Apr 28, 2021
Secretary of State
7664801880CC**Current Principal Place of Business:**9220 ESTERO PARK COMMONS BLVD
SUITE 7
ESTERO, FL 33928**Current Mailing Address:**9220 ESTERO PARK COMMONS BLVD
SUITE 7
ESTERO, FL 33928 US**FEI Number: 20-3864389****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DENTONS COHEN & GRIGSBY P.C., INC.
9110 STRADA PLACE, STE. 6200
NAPLES, FL 34108 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: FELIX A. MEHLER, ESQ.****04/28/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D, VP
Name	BREUNIG-PARRA, LAURA DR.
Address	9220 ESTERO PARK COMMONS BLVD. SUITE 7
City-State-Zip:	ESTERO FL 33928

Title	D, P
Name	PARRA, JOSHUA DR
Address	9220 ESTERO PARK COMMONS BLVD. SUITE 7
City-State-Zip:	ESTERO FL 33928

Title	S
Name	PARRA, JOSHUA DR
Address	9220 ESTERO PARK COMMONS BLVD. SUITE 7
City-State-Zip:	ESTERO FL 33928

Title	T
Name	PARRA, JOSHUA DR
Address	9220 ESTERO PARK COMMONS BLVD. SUITE 7
City-State-Zip:	ESTERO FL 33928

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: DR LAURA BREUNIG-PARRA**D, VP****04/28/2021**

Electronic Signature of Signing Officer/Director Detail

Date