

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041746

Entity Name: ANIMAL HOSPITAL OF UNIVERSITY DRIVE, PA

Current Principal Place of Business:

2585 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33322

Current Mailing Address:

3744 PEBBLEBROOK MANOR
COCONUT CREEK, FL 33073

FEI Number: 26-2481930

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAUL R. ALFIERI, P.L.
5143 NW 42 TERRACE
COCONUT CREEK, FL 33073 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 DIRECTOR, PRESIDENT, TREASURER
Name ANSARA, CARL
Address 2585 NORTH UNIVERSITY DRIVE
City-State-Zip: SUNRISE FL 33322

Title DIRECTOR, VP, SECRETARY
Name ANSARA, RACHEL
Address 2585 NORTH UNIVERSITY DRIVE
City-State-Zip: SUNRISE FL 33322

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: CARL ANSARA

PRESIDENT

01/25/2014

Electronic Signature of Signing Officer/Director Detail

Date