

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000091565

**Entity Name:** KNOWLES VETERINARY SERVICES, INC.

**Current Principal Place of Business:**

1000 NW 27 AVE  
MIAMI, FL 33125

**Current Mailing Address:**

1000 NW 27 AVE  
MIAMI, FL 33125

**FEI Number: 46-4224446**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FELUREN, MARK S  
1000 E BROWARD BLVD SUITE 1110  
FORT LAUDERDALE, FL 33301 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	D
Name	WISE, DAVID T	Name	BLOCK, JAMES H
Address	1000 NW 27 AVE	Address	1000 NW 27 AVE
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	MIAMI FL 33125
Title	D		
Name	WISE, JANE A		
Address	1000 NW 27 AVE		
City-State-Zip:	MIAMI FL 33125		

*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: DAVID T WISE**

**PRES**

**03/02/2016**

Electronic Signature of Signing Officer/Director Detail

Date