

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000176995

**Entity Name:** DORAL ANIMAL MEDICAL CENTER LLC

**Current Principal Place of Business:**

9690 NW 41ST ST,  
UNIT 2  
DORAL, FL 33178

**Current Mailing Address:**

9690 NW 41ST ST,  
UNIT 2  
DORAL, FL 33178 US

**FEI Number: 81-4139730**

**Certificate of Status Desired: No**

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

OGC ASSOCIATES PA  
3275 W HILLSBORO BLVD  
STE 306  
DEERFIELD BEACH, FL 33442 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:** ODIJAS CAMINHA

03/10/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PEDOTE, DIEGO  
Address AV. DR. MARTIN LUTHER KING 2355,  
APTO 74B  
City-State-Zip: OSASCO SP 06030--016

Title MGR  
Name VIOTTI, CHRISTIANO  
Address 1378 SABAL TRAIL  
City-State-Zip: WESTON FL 33327

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** VIOTTI, CHRISTIANO

MGR

03/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date