

CITY OF DORAL

FACADE IMPROVEMENT GRANT AGREEMENT

THIS AGREEMENT is made and entered into this 18 day of June, 2019 by and between the City of Doral, Florida, ("City") and Veterinary Acquisitions, owner of a property located at 9400 NW 58th Street, Doral, FL 33178 whose Federal I.D. No. is 65-0725189 ("Recipient").

RECITALS

WHEREAS, the City of Doral is desirous of encouraging activities which contribute to the enhancement of redevelopment activities in Doral, Florida; and

WHEREAS, the Doral Façade Improvement Grant Program provides financial assistance to businesses, home owner associations and property owners in Doral in order to stimulate private sector investment, beautification, economic growth and job creation in the City by improving the appearance of the buildings within City boundaries; and

WHEREAS, the program will provide financial assistance by contributing up to 50% of the costs, in an amount not to exceed \$10,000 per project, associated with façade and beautification projects for properties throughout the City limits; and

WHEREAS, pursuant to the FACADE IMPROVEMENT GRANT PROGRAM, Anjanette Cabeza, as a duly authorized representative of Recipient, has applied for a Grant to assist it in making exterior property improvements to the property located at 9400 NW 58th Street, Doral, FL 33178; and

WHEREAS, after reviewing the application submitted by Recipient, the City has found and determined that it would be beneficial to its economic development and beautification efforts to support Recipient's improvement project through a grant of funds upon the terms and conditions hereinafter described; and

NOW, THEREFORE, for the mutual considerations described herein and other good and valuable consideration, the parties agree as follows:

I) CITY Obligations and Responsibilities:

- (A) Upon Recipient completing the comprehensive exterior improvements acceptable to the City Manager and after construction is completed and upon receipt of all documentation relating to the project's improvement costs, the City shall reimburse Recipient for 50 % of the construction cost up to a maximum grant of \$10,000.00. In the event that Recipient fails to complete the comprehensive exterior improvements by the completion date, City shall not be liable for reimbursement for any construction costs unless the City Manager agrees in writing.
- (B) The CITY shall not be liable for payments for services beyond the scope of the City authorized improvements, nor shall the City be liable for improvements which are made after the exterior property improvement project is completed or after the City has authorized reimbursement to the Recipient.
- (C) The City shall not be a party to nor is it liable for any contractual payments to any contractors, architects or other third parties. Payments to any contractors, architects or other parties are the sole responsibility of the Recipient.

II) Recipient Obligations and Responsibilities:

- (A) Recipient agrees to accept grant funds in an amount not to exceed \$10,000.00. Such grant funds shall be done on a reimbursement basis and shall only be for 50% of the construction cost up to a maximum grant amount of \$10,000.00; and
- (B) Recipient acknowledges and agrees that the grant funds will be limited to reimbursements for specific property improvements approved by the City on the property located at: **9400 NW 58th Street, Doral, FL 33178**; and
- (C) Recipient represents and warrants that it is the owner of the subject property, or if the Recipient is not the owner, it has received the owner's written consent to improve the subject property (shown in Exhibit "A" which is attached hereto and incorporated by reference) and as such it is authorized to contract for exterior property improvements; and
- (D) Recipient shall submit grant application within grant cycle and before submission deadline. A final design sketch of the exterior property improvements along with the selected contractor's bid for the improvements will be included as part of the Façade Improvement Grant Application Packet (which is attached hereto within Exhibit "B" and is incorporated herein by reference.) At least two additional comparable estimates by licensed contractors will also be required as part of the Grant Application Packet. All general exterior property improvements shall be consistent with all applicable Federal, State and City of Doral codes and design regulations; and
- (E) Recipient agrees that all exterior property improvements as set forth in Exhibit "B" shall be completed by 6/18/20 (the completion date) and no grant fund reimbursement payments shall be made prior to completion; and
- (F) Recipient shall comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations; and

- (G) Recipient shall maintain books, records, and documents and adequate internal controls concerning the façade improvements, to sufficiently and properly reflect all expenditures of funds that will be subject to reimbursement by the City under this Agreement; and
- (H) Recipient shall make all books pertaining to the business and exterior property improvements project available to the City for inspection, review or audit purposes at all reasonable times upon demand the term of this Agreement and for three (3) years thereafter; and
- (I) The Recipient shall submit to the City not more than sixty (60) days after the exterior property improvement project is completed, all supporting documentation, including but not limited to paid receipts, two color photographs of the completed exterior property improvements and documentation relating to the construction costs expended for the exterior property improvements project on the subject property; and
- (J) The Recipient and or the Recipient's contractor(s) shall carry worker's compensation insurance to cover all workers involved in the project. Recipient shall maintain, at its own expense, General Liability Insurance covering the subject property and the resultant uses thereof in the amount of \$1,000,000.00 and will maintain property damage coverage for a minimum of \$100,000.00 the premium of which shall be paid prior to execution of this Agreement. Said insurance shall name the City as an additional insured; and shall provide that the City will receive notice of any cancellation or change in coverage. Recipient shall furnish City with certificates of Insurance. Any lapse of this coverage during this period of the Agreement shall be grounds for termination of the Agreement by the City.

(III) Representations

As a material consideration in granting the funds which are the subject of this agreement, the City has relied upon the following representatives of the Recipient:

1. Recipient, or any of its officers, directors, or employees has not been convicted of any felony or crime involving dishonesty, fraud, misrepresentation or moral turpitude.
2. To the best knowledge of the Recipient, there is no action, investigation or proceeding pending against the Recipient or any of its officers, directors or employees involving dishonesty, fraud, misrepresentation, moral turpitude or like matters, nor is there any factual basis which is likely to give rise to such an action, investigation or proceeding.
3. The Recipient is a duly authorized representative of the business and is authorized to execute this Agreement.
4. The Recipient shall comply with all applicable laws and procedures in connection with the expenditure of funds including but not limited to obtaining all necessary permits and licenses.

(IV) Term of Agreement

This Agreement shall commence upon execution and shall expire sixty (60) days after the Completion Date. In the event that the Recipient fails to complete the project within one (1) year from the date of execution of this Agreement, City reserves the right to terminate this Agreement upon twenty-four (24) hours notice to Recipient.

(V) Designated Representatives

The names and addresses of the Designated Representatives of the parties in connection with this Agreement are as follows:

AS TO AGENCY: **City Manager**
City of Doral, FL
8401 NW 53rd Terrace
Doral, FL 33166

WITH A COPY TO: **General Counsel**
City of Doral, FL
8401 NW 53rd Terrace
Doral, FL 33166

AS TO RECIPIENT: **Veterinary Acquisitions**
6861 NW 113th Terrace
Doral, FL 33178

WITH A COPY TO: _____

- (A) Recipient acknowledges that the City is not affiliated with or responsible for Recipient's activities hereunder or otherwise. Further, Recipient hereby indemnifies and holds harmless the City for any actions, suits, or proceedings arising out of the subject matter of this Agreement. Such obligation to indemnify and hold harmless shall continue notwithstanding any negligence or comparative negligence on the part of the City relating to such loss or damage and shall include all costs, expenses and liabilities incurred by the City in connection with any such claim, suit, action proceeding brought thereon and any order, judgment or decree which may be entered in any such action or proceeding or as a result thereof.
- (B) Recipient agrees that nothing herein contained is intended or should be construed as in any way creating or establishing the relationship of partners or joint ventures between the City and the Recipient as an agent, representative or employee of the City for any purpose or in any manner whatsoever, and that it shall not represent to any third parties that such is the case.
- (C) Recipient may not assign any rights under this Agreement without the prior written consent of the City, which may be withheld in its sole discretion.
- (D) The name and address of the official payee to whom payments hereunder will be made is:

 Veterinary Acquisitions, 6861 NW 113th Terrace, Doral, FL 33178
- (E) This Agreement shall be governed by the laws of the State of Florida. Any and all legal action necessary to enforce this Agreement will be heard in Miami-Dade County, Florida. No remedy herein conferred upon any part is intended to be in addition to every other remedy given hereunder or now or hereafter

existing at law or in equity or by statute or otherwise. No single or partial exercise by any part of any right, power or remedy hereunder shall preclude any other of further exercise thereof.

- (F) This Agreement may only be amended or modified by an instrument in writing signed by both parties.
- (G) The Recipient acknowledges and agrees that the City may in its sole discretion discontinue this program at any time. At all other times, either party can cancel this agreement by thirty-(30) days written notice to the other. In the event that Recipient cancels this Agreement, the City shall not be liable to any contractor (s) or subcontractor (s) with relation to any work performed pursuant to the contract between Recipient and the Contractor(s) or subcontractor(s).
- (H) As a condition of receiving funds through the Façade Improvement Program, property owners must agree to keep the façade improvements well maintained, and to refrain from substantial modification of same, for a period of one (1) year. Removal, substantial alteration, or failure to maintain the façade improvements with the specified time frame shall be cause for the City to demand reimbursement of granted funds. Upon demand from the City, the applicant's failure to repair and/or replace the improvements or to reimburse the granted funds may cause the City to place a lien on the property for the amount of granted funds and administrative fees. The property owner further agrees to execute, as a condition to the award, a covenant or other instrument in a form prescribed by the City which will be recorded in the Public Records as an encumbrance upon the property for one (1) year from the project completion date.

FACADE IMPROVEMENT GRANT PROGRAM AGREEMENT (VETERINARY ACQUISITIONS)

ATTEST:

DORAL, FLORIDA

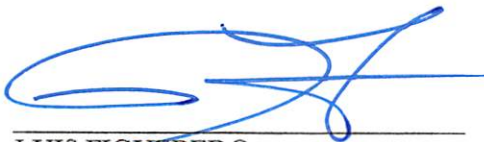


CONNIE DIAZ, CMC
CITY CLERK




ALBERT P. CHILDRESS
CITY MANAGER

Approved as to Form and Legality for
the Use and Reliance of the City of Doral,
Florida, only.





LUIS FIGUEREDO
CITY ATTORNEY

AS TO RECIPIENT

ATTEST:


CORPORATE SECRETARY



By: 
Signature
Print Name: A. Cabera
Title: President



15 MAR '19 PM1:22

Applications Forms Doral Façade Improvement Grant Program

Date 3/15/19
15 MAR '19 PM1:22

Name and Type of Business

Veterinary Acquisitions

Location of Business
(Street address, name of building if applicable)

9400 NW 58th Street
Doral FL 33178

Name/Address of Property Owner

Anjanette Cabeza
6861 NW 113th Ct
Doral, FL 33178

Property Owner Phone

305-761-7766

Property Owner Mobile Phone

305-761-7766

Applicant's Mailing Address

6861 NW 113th Ct
Doral, FL 33178

Email Address

dogdocmiami@aol.com

Property Folio # (s) 35-3021-001-0313

Permit #:

Total Cost of Project \$ 113,000 (attach itemized breakdown)

Requested Grant Amount \$ 10,000



INDEMNITY AND HOLD HARMLESS AGREEMENT

Anjanette Cabeza (the Property Owner) agree(s) to indemnify and hold harmless The City of Doral and their officers, employees, agents or instrumentalities (the indemnified parties), from any and all claims, liabilities, demands, suits, causes of actions or proceedings of any kind or nature, losses or damages including attorneys' fees and costs of defense, which the indemnified parties may incur arising out of the negligence, error, omission, intentional acts, or other cause arising out of or resulting from the Property Owner's participation in the Doral Facade Improvement Grant Program. The obligation to indemnify and hold harmless specifically includes claims, liabilities, demands, suits, causes of actions or proceedings arising from the negligent acts or omissions of the indemnified parties. The Property Owner shall pay claims and losses in connection with the all of the foregoing and shall investigate and defend all claims, suits, or action of any kind or nature, including appellate proceedings in the name of the applicable indemnified party, and shall pay all costs and judgments and attorney's fees which may issue thereon. The parties agree that this agreement, and its underlying obligations, will be construed under Florida law. The Property Owner further agrees not to contest jurisdiction nor venue in the courts situated in Miami-Dade County, Florida. In consideration of being granted monies for restoration, modifications, signage, or other physical changes to the property located at the above address, the Property Owner is solely responsible for providing contractors, and assuring that contractors are fully insured and licensed and have obtained all necessary permits in accordance with City regulations.

Property Owner agrees that this indemnity and hold harmless agreement is intended to be as broad and inclusive as permitted by the laws of the State of Florida and that if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. Property Owner further states that he/she has carefully read the above indemnity and hold harmless agreement and he/she knows its contents and signs this agreement as his/her own free act. Property Owner's obligations and duties hereunder shall in no manner be limited or restricted by the maintaining of any insurance coverage related to the above referenced event. The undersigned hereby represents and warrants that he/she has full and legal authorization to enter into this agreement.

Dated this 14 day of March, 2019.

Property Owner
Signature

Print Name

A. Cabeza

Witness

Print Name

David Martinez



Certification Regarding Lobbying

Certification for Contracts, Grants – Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract* grant, loan, or cooperative agreement.

2. If any, funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal Contract, grant loan, or cooperative agreement, the undersigned shall complete and submit standard Form- LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-contracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty for no less than \$10,000 and not more than \$100,000 for each such failure.

BY: Anjanette Gabera Inc (Print business name & owner's name)

NAME: [Signature] (Signature of owner)

TITLE: President

DATE: 3/14/19

SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a)



FLORIDA STATUTES ON PUBLIC ENTITY CRIMES

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS

1. This form statement is submitted to Miami-Dade County

by Anjanette Cabeza (Print individual's name and title)

for Dual Centre Animal Clinic (Print name of business submitting sworn statement)

whose business address is: 9400 NW 58TH ST Address, City, State, Zip Code Doral, FL 33178

and if applicable its Federal Employer Identification Number (FEIN) is 65-0725189

If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement.

2. I understand that a "public entity crime" as defined in paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to an directly related to the transactions of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to any bid or contract for goods or services to be provided to public entity or agency or political subdivision of any other conspiracy, or material misinterpretation.

3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in an federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.

4. I understand that an "Affiliate" as defined in paragraph 287.133(1)(a), Florida Statutes, means:

1. A predecessor or successor of a person convicted of a public entity crime, or
2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime Florida during the preceding 36 months shall be considered an affiliate.

5. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States within the



legal power to enter into a binding contract and which bids or applies to bid on contracts of the provision of goods or entity. The term "person" includes those executives, partners, shareholders, employees, members, and agents who are active in management of an entity.


6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

Neither the entity submitting sworn statement, not any of its officers, director, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or any affiliate of the entity had been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND (please indicate which additional statement applies.)

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent proceeding before a Hearing Officer of the State of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. Attach a copy of the final order.

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED I PARAGRAPH 1(ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OR THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THAT PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 28.017 FLORIDA STATUTES FOR A CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.


(Signature)

Sworn to and subscribed before me this 15 day of MARCH, 2019.

Personally Known Anjanette Cabeza

Or produced identification _____ Notary Public-State of Florida

_____ My commission expires (Printed, typed or stamped commissioned name of notary public)





CRIMINAL RECORD AFFIDAVIT

The individual, officer, director, president or entity entering into a contract or receiving funding from the City has _____ has not _____ as of the date of this affidavit been convicted of a felony during the past ten (10) years.

Veterinary Acquisitions / Doral Central Animal Clinic
(Printed Name of Business)

9400 NW 58TH ST
(Business Address)

Doral, FL 33178
(City, State, Zip)

Arijanette Cabeza, DVM
(Print Owner or President Name)

STATE OF FLORIDA

COUNTY OF MIAMI

DADE

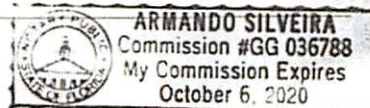
The a foregoing instrument was acknowledged before me this 15 day of March,
2019, by Arijanette Cabeza on behalf of Veterinary Acquisitions
(Signature) (Business Name)

who is personally known to me or has produced _____, as identification

Notary Signature: Armando Silveira

Type or Print Name: Armando Silveira

Notary Seal:





Florida The Sunshine State

ANA CABEZA
6861 NW 113TH CT
DORAL, FL 33178-4521
DOB: 01-04-1969 SEX: F
ISSUED: 11-30-2012 HGT: 5-7
EXPIRES: 01-04-2021

ANA CABEZA

REST
ENDORSE

SAFE DRIVER MOTORCYCLE ALSO

Operation of a motor vehicle constitutes consent to any sobriety test required by law



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Limited Liability Company
VETERINARY ACQUISITIONS L.L.C.

Filing Information

Document Number L07000054755
FEI/EIN Number 64-0963616
Date Filed 05/23/2007
State FL
Status ACTIVE

Principal Address

6861 NW 113TH COURT
DORAL, FL 33178

Mailing Address

6861 NW 113TH COURT
DORAL, FL 33178

Registered Agent Name & Address

CABEZA, ANJANETTE GESQ
6861 NW 113th Ct
DORAL, FL 33178

Name Changed: 07/07/2017

Address Changed: 07/07/2017

Authorized Person(s) Detail

Name & Address

Title MGR

CABEZA, ANJANETTE DVM
6861 NW 113TH COURT
DORAL, FL 33178

Annual Reports

Report Year	Filed Date
2016	05/23/2016

2017 07/07/2017
2018 04/20/2018

Document Images

04/20/2018 -- ANNUAL REPORT	View image in PDF format
07/07/2017 -- ANNUAL REPORT	View image in PDF format
05/23/2016 -- ANNUAL REPORT	View image in PDF format
03/18/2015 -- ANNUAL REPORT	View image in PDF format
03/01/2014 -- ANNUAL REPORT	View image in PDF format
04/14/2013 -- ANNUAL REPORT	View image in PDF format
03/09/2012 -- ANNUAL REPORT	View image in PDF format
04/22/2011 -- ANNUAL REPORT	View image in PDF format
04/28/2010 -- ANNUAL REPORT	View image in PDF format
04/21/2009 -- ANNUAL REPORT	View image in PDF format
05/19/2008 -- ANNUAL REPORT	View image in PDF format
05/23/2007 -- Florida Limited Liability	View image in PDF format

Project: Doral Center Animal Clinic
 Location: 9400 NW 58th Street
 Doral, FL 33172



Clinic 4,875 sq.ft.
 Total Area: 4,875 sq.ft.

March 13, 2019

Division	Description	Base Budget	Cost per SF	Comments / Generic Descriptions
Division 1	General Conditions	\$31,440	\$6.45	Supervision - Management
	Trash Hauling Fees/Removal	\$1,100	\$0.23	Dumpster Fees
	Final Cleaning	\$750	\$0.15	Final Cleaning
	Design Fees - Arch. Engineering Allowance	By Owner	By Owner	By Owner
	Permit Fees	By Owner	By Owner	By Owner
	Impact Fees	By Owner	By Owner	By Owner
	Utility Connection Fees	By Owner	By Owner	By Owner
Division 2	Demo - General	\$2,286	\$0.47	Demo existing site conditions
	Brick Pavers	\$6,208	\$1.27	Brick Pavers 4" x 8"
	Benches	\$1,700	\$0.35	Typical of 2 Conc Benches
	Landscaping	\$1,000	\$0.21	Green Areas & Plants
	Irrigation	\$350	\$0.07	Repair to existing sprinklers
Division 3	Concrete	\$6,733	\$1.38	Screen Wall & Concrete banding @ pavers
	Stone Veneer	\$4,938	\$1.01	Wainscot Stone Veneer & Columns
Division 5	Structural Steel	NIC	NIC	Not Applicable
Division 6	Rough Carpentry	\$2,650	\$0.54	Heavy Timber Trusses
Division 7	Stading Seam Metal Roofing	\$2,250	\$0.46	Entry Roof
Division 8	Doors & Hardware Material	NIC	NIC	Not Applicable
	Storefronts	\$3,350	\$0.69	New Glass Entry Door & Hardware
Division 9	Exterior Finishes			
	Stucco Façade	\$16,935	\$3.47	Exterior Stucco
	Stucco Banding	\$3,868	\$0.79	Stucco Banding @ windows
	Painting - Exterior	\$4,800	\$0.98	Exterior Painting
Division 10	Signage	By Owner	By Owner	By Owner
Division 16	Electrical	NIC	NIC	Not Applicable
	Empty Conduits for Security Camera System	NIC	NIC	Not Applicable
	Exterior Light Fixtures Allowance	\$2,600	\$0.53	Allowance for New Fixtures
	Grand Total (All Divisions)	\$92,956	\$19.07	
	General Liability Insurance	\$929.56	\$0.19	\$2M Coverage
	Builder's Risk Insurance	By Owner	By Owner	By Owner
	Payment & Performance Bond	NIC	NIC	Not Applicable
	Contractor's Overhead	\$4,648	\$0.95	
	Contractor's Markup	\$9,853	\$2.02	
	Total Project Budget	\$108,387		
	Cost Per Square Foot		\$22.23	

- NOTES:**
 1 Security Cameras by Owner
 2
 3
 4



General description of proposed improvement:

- Façade
- Siding
- Walls/Fencing/Railings
- ADA improvements
- Pedestrian amenities
- Windows/Doors
- Awnings/Canopies
- Lighting
- Painting
- Signage
- Detached monument signs
- Sidewalks/Surface Parking
- Landscape
- Other

Other details: Attach sheet if needed.

APPLICATION MUST BE ACCOMPANIED BY THREE (3) BONA FIDE BIDS FROM LICENSED CONTRACTORS FOR THE WORK TO BE COMPLETED UNDER THIS PROGRAM.

Signature of Property Owner

Print Name of Property Owner

Anjanette Cabezana

Date

3/14/19







OFFICE OF THE PROPERTY APPRAISER

Summary Report

Generated On : 3/14/2019

Property Information	
Folio:	35-3021-001-0313
Property Address:	9400 NW 58 ST Doral, FL 33178-1616
Owner	VETERINARY ACQUISITIONS LLC
Mailing Address	6861 NW 113 CT DORAL, FL 33178 USA
PA Primary Zone	7100 INDUSTRIAL - LIGHT MFG
Primary Land Use	1813 OFFICE BUILDING - MULTISTORY : OFFICE BUILDING
Beds / Baths / Half	0 / 0 / 0
Floors	2
Living Units	0
Actual Area	9,631 Sq.Ft
Living Area	9,631 Sq.Ft
Adjusted Area	9,297 Sq.Ft
Lot Size	35,632 Sq.Ft
Year Built	1998



Assessment Information			
Year	2018	2017	2016
Land Value	\$1,140,224	\$1,140,224	\$712,640
Building Value	\$978,373	\$268,927	\$146,360
XF Value	\$72,293	\$65,460	\$0
Market Value	\$2,190,890	\$1,474,611	\$859,000
Assessed Value	\$2,190,890	\$866,152	\$787,411

Benefits Information				
Benefit	Type	2018	2017	2016
Non-Homestead Cap	Assessment Reduction		\$608,459	\$71,589

Note: Not all benefits are applicable to all Taxable Values (i.e. County, School Board, City, Regional).

Short Legal Description
21 53 40 .818 AC
FLA FRUIT LAND CO SUB PB 2-17
E125FT OF E1/2 OF TR 32 LESS
N45FT FOR R/W
LOT SIZE 35632 SQ FT

Taxable Value Information			
	2018	2017	2016
County			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$2,190,890	\$866,152	\$787,411
School Board			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$2,190,890	\$1,474,611	\$859,000
City			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$2,190,890	\$866,152	\$787,411
Regional			
Exemption Value	\$0	\$0	\$0
Taxable Value	\$2,190,890	\$866,152	\$787,411

Sales Information			
Previous Sale	Price	OR Book-Page	Qualification Description
01/28/2016	\$100,000	29968-4581	Corrective, tax or QCD; min consideration
10/19/2009	\$100	29069-0912	Corrective, tax or QCD; min consideration
07/20/2009	\$1,500,000	26958-2778	Qual by exam of deed
11/01/1997	\$278,400	17881-0138	Sales which are qualified

The Office of the Property Appraiser is continually editing and updating the tax roll. This website may not reflect the most current information on record. The Property Appraiser and Miami-Dade County assumes no liability, see full disclaimer and User Agreement at <http://www.miamidade.gov/info/disclaimer.asp>

Version:



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Profit Corporation
DORAL CENTRE ANIMAL CLINIC, INC.

Filing Information

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State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	06/26/2000
Event Effective Date	NONE

Principal Address

9400 NW 58TH ST
DORAL, FL 33178

Changed: 04/22/2011

Mailing Address

9400 NW 58TH STREET
DORAL, FL 33178

Changed: 04/22/2011

Registered Agent Name & Address

VELEZ, ARNALDO P.A.
35 ALMERA AVENUE
CORAL GABLES, FL 33134

Name Changed: 10/19/2000

Address Changed: 10/19/2000

Officer/Director Detail

Name & Address

Title D

CABEZA, ANJANETTE
9400 NW 58TH ST
DORAL, FL 33178

Annual Reports

Report Year	Filed Date
2016	04/03/2016
2017	04/25/2017
2018	04/20/2018

Document Images

04/20/2018 -- ANNUAL REPORT	View image in PDF format
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04/30/2010 -- ANNUAL REPORT	View image in PDF format
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04/28/2003 -- ANNUAL REPORT	View image in PDF format
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05/14/2001 -- ANNUAL REPORT	View image in PDF format
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06/26/2000 -- Amendment	View image in PDF format
04/21/2000 -- Amendment and Name Change	View image in PDF format
04/21/1999 -- ANNUAL REPORT	View image in PDF format
04/10/1998 -- ANNUAL REPORT	View image in PDF format
01/13/1997 -- Domestic Profit Articles	View image in PDF format

2018-2019
LOCAL BUSINESS TAX RECEIPT

2019002609

CITY OF DORAL, FLORIDA

8401 Northwest 53rd Terrace

Doral, Florida 33166

(305) 593-6631

MACHINES:

SEATS:

STATE LIC.#:

EMPLOYEES:

LICENSE FEE:

14

\$72.00

213VET VETERINARY CLINIC


FOR THE PERIOD COMMENCING OCTOBER 1, 2018
AND ENDING SEPTEMBER 30, 2019 LICENSED TO
ENGAGE IN THE FOLLOWING BUSINESS:

Business Name: **DORAL CENTRE ANIMAL CLINIC INC**

DBA:

Address: 9400 NW 58TH ST
DORAL, FL 33178

Conditions: MAX OF 2 VETERINARIANS, NO X-RAYS, NO OUTSIDE
STORAGE OR DISPLAYS:


Chief Licensing Official

8401 NW 53rd Terrace, Doral, Florida 33166 • www.cityofdoral.com • 305-593-6631 • Fax 305-593-6616

ARTIFICIAL WATERMARK SCREENED ON TO BACK OF DOCUMENT

001733

Local Business Tax Receipt
Miami-Dade County, State of Florida
-THIS IS NOT A BILL - DO NOT PAY



3857134

BUSINESS NAME/LOCATION
CABEZA ANJANETTE DVM
9400 NW 58TH ST
DORAL FL 33178

RECEIPT NO.
RENEWAL
4027298

EXPIRES
SEPTEMBER 30, 2019
Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

OWNER
CABEZA ANJANETTE DVM
C/O DORAL CENTRE ANIMAL CLINIC INC

SEC. TYPE OF BUSINESS
212 PROFESSIONAL
VM0006459

PAYMENT RECEIVED
BY TAX COLLECTOR
\$60.00 08/07/2018
CREDITCARD-18-059838

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector

000018

Local Business Tax Receipt
Miami-Dade County, State of Florida
-THIS IS NOT A BILL - DO NOT PAY



3857134

BUSINESS NAME/LOCATION
CABEZA ANJANETTE DVM
9400 NW 58TH ST
DORAL FL 33178

RECEIPT NO.
RENEWAL
4027298

EXPIRES
SEPTEMBER 30, 2018
Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

OWNER
CABEZA ANJANETTE DVM
C/O DORAL CENTRE ANIMAL CLINIC INC

SEC. TYPE OF BUSINESS
212 PROFESSIONAL
VM0006459

PAYMENT RECEIVED
BY TAX COLLECTOR
\$175.00 08/07/2018
CREDITCARD-18-059838

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector



/ 27

89218 83039086590115 2978810000

Please request changes on the back. Notes on the front will not be detected.

The amount enclosed includes the following donation: FPL Care To Share \$ _____

B 5,8 8303



AUTO **CO 7883 045653

DORAL CENTRE ANIMAL CLINIC INC 9400 NW 58TH ST DORAL FL 33178-1616

Make check payable to FPL in U.S. funds and mail along with this coupon to:

FPL GENERAL MAIL FACILITY MIAMI FL 33188-0001



Account number	Total amount you owe	New charges due by	Amount enclosed
[REDACTED]	\$1,887.92	Jan 26 2017	\$

Your electric statement

For: Dec 05 2016 to Jan 05 2017 (31 days)

Customer name: DORAL CENTRE ANIMAL CLINIC

Service address: 9400 NW 58TH ST

Statement date: Jan 05 2017

Next meter reading: Feb 03 2017

Amount of your last bill	Payments (-)	Additional activity (+ or -)	Balance before new charges (=)	New charges (+)	Total amount you owe (=)	New charges due by
892.18	0.00	0.00	892.18	995.74	\$1,887.92	Jan 26 2017

Meter reading - Meter KCJ4970

Current reading 38304
Previous reading - 28228
kWh used 10076

Demand reading 25.39
Demand kW 25

Energy usage

	Last Year	This Year
kWh this month	12652	10076
Service days	34	31
kWh per day	372	325

**The electric service amount includes the following charges:

Customer charge:	\$25.00
Fuel: (\$0.028200 per kWh)	\$284.14
Non-fuel: (\$0.022500 per kWh)	\$226.71
Demand: (\$10.60 per kW)	\$265.00

Amount of your last bill 892.18
Balance before new charges \$892.18

New charges (Rate: GSD-1 GENERAL SERVICE DEMAND)

Electric service amount	800.85**
Storm charge	7.55
Gross receipts tax	20.73
Franchise charge	21.97
Utility tax	63.60
Florida sales tax	59.15
Discretionary sales surtax	8.51
Late payment charge	13.38
Total new charges	\$995.74

Total amount you owe \$1,887.92

- Did you forget? \$892.18 of this bill is past due. If payment has been made, we thank you and apologize for this reminder.

- Payments received after **January 26, 2017** are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.

Please have your account number ready when contacting FPL.
 Customer service: (305) 442-0388
 Outside Florida: 1-800-226-3545
 To report power outages: 1-800-4OUTAGE (468-8243)
 Hearing/speech impaired: 711 (Relay Service)
 Online at: www.FPL.com



Your electric statement

For: Jan 04 2019 to Feb 04 2019 (31 days)

Customer name: DORAL CENTRE ANIMAL CLINIC

Service address: 9400 NW 58TH ST

Statement date: Feb 04 2019

Next meter reading: Mar 05 2019

Amount of your last bill	Payments (-)	Additional activity (+ or -)	Balance before new charges (=)	New charges (+)	Total amount you owe (=)	New charges due by
916.18	916.18 CR	0.00	0.00	847.60	\$847.60	Feb 25 2019

Meter reading - Meter KCJ4970

Current reading 68394
 Previous reading - 59643
 kWh used **8751**

Demand reading 20.91
 Demand kW 21

Energy usage

	Last Year	This Year
kWh this month	8368	8751
Service days	32	31
kWh per day	261	282

**The electric service amount includes the following charges:

Customer charge:	\$25.54
Fuel: (\$0.027250 per kWh)	\$238.46
Non-fuel: (\$0.022840 per kWh)	\$199.88
Demand: (\$10.95 per kW)	\$229.95

Amount of your last bill 916.18
 Payment received - Thank you 916.18
 Balance before new charges \$0.00

New charges (Rate: GSD-1 GENERAL SERVICE DEMAND)

Electric service amount	693.83**
Storm charge	7.52
Gross receipts tax	17.98
Franchise charge	14.39
Utility tax	55.55
Florida sales tax	51.00
Discretionary sales surtax	7.33
Total new charges	\$847.60

PAID 13899 2/26/19 847.60

Total amount you owe \$847.60

- Payments received after February 25, 2019 are considered late; a late payment charge, the greater of \$5.00 or 1.5% of your past due balance will apply. Your account may also be billed a deposit adjustment.
- The Florida Public Service Commission is reviewing a routine storm charge adjustment that would apply to your bill beginning in March. To learn more about your energy bill, visit FPL.com/rates.

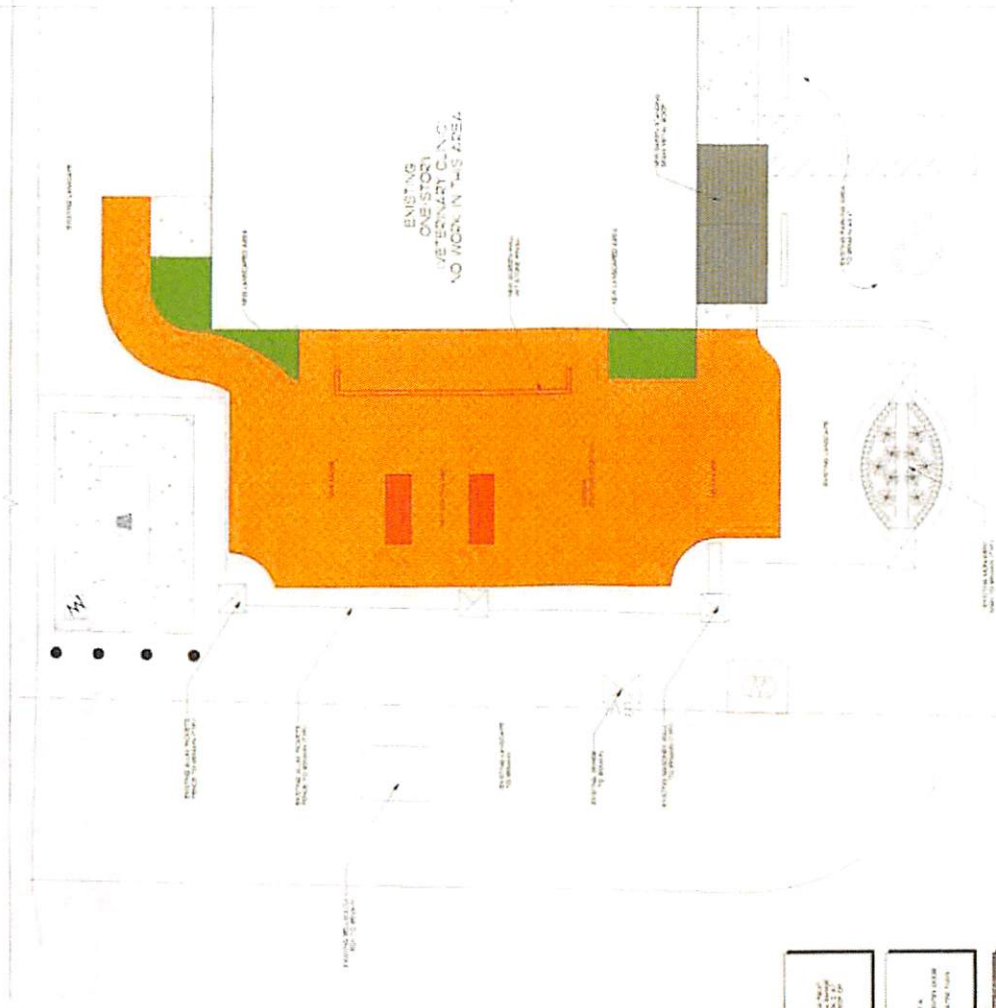


Please have your account number ready when contacting FPL.
 Customer service: (305) 442-0388
 Outside Florida: 1-800-226-3545
 To report power outages: 1-800-4OUTAGE (468-8243)
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 Online at: www.FPL.com

LANDSCAPE AREA	69.4 SQ FT
SCREEN WALL	46.2 FT
BENCHES	23.5 SQ FT
BRICK PAVERS	954.1 SQ FT
STANDING SEAM R...	76.8 SQ FT

Facade Beautification

9-400 NW 58th ST, Doral, FL 33178



PARTIAL SITE PLAN
SCALE: 1/8" = 1'-0"

<p>APPLICABLE CODES</p> <p>FLORIDA STATE BUILDING CODE FLORIDA STATE PLUMBING CODE FLORIDA STATE ELECTRICAL CODE FLORIDA STATE MECHANICAL CODE FLORIDA STATE FUEL GAS CODE FLORIDA STATE PAINT AND COATING CODE FLORIDA STATE ROOFING CODE FLORIDA STATE WIND RESISTANCE CODE</p>	<p>EXIST. LEGAL DESCRIPTION</p> <p>THE EXISTING LEGAL DESCRIPTION OF THE PROPERTY IS AS FOLLOWS: ...</p>
<p>ZONING INFORMATION</p> <p>ZONING DISTRICT: ... ZONING MAP: ... ZONING DISTRICT: ...</p>	<p>EXIST. SITE ACCESSIBILITY</p> <p>THE EXISTING SITE ACCESSIBILITY IS AS FOLLOWS: ...</p>



LOCATION SKETCH
SHEET N-1

Facade Beautification for Doral Centre Animal Hospital

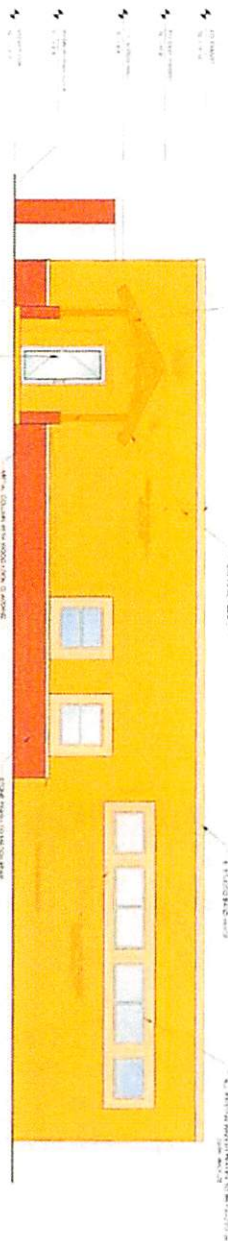
Project Location:
Doral Center Animal Hospital
9400 NW 58th Street, Doral, FL 33178



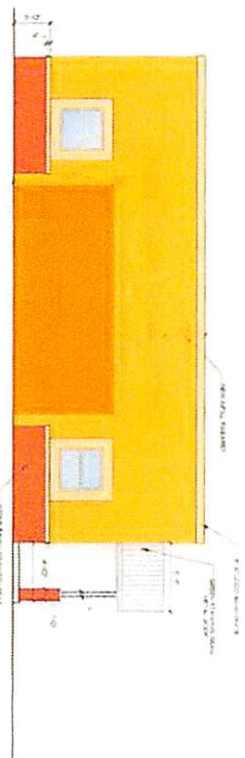
DATE: 08/27/2018
DRAWN: JRM
CHECKED: JRM
SCALE: 1/8" = 1'-0"

SHEET: **A-10**

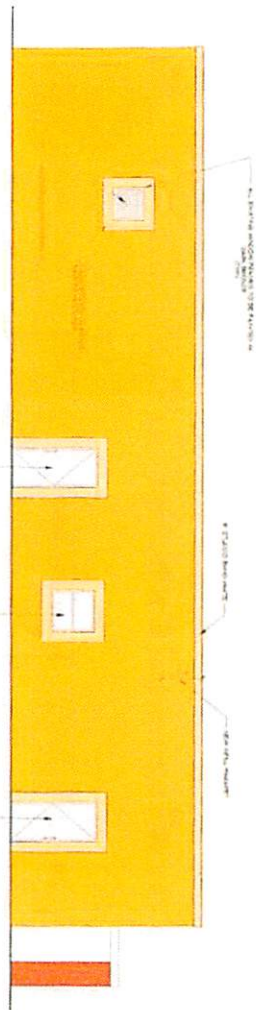
 STONE VENEER 345.0 SQ. FT
 STUCCO BAND 365.2 SQ. FT
 NEW STUCCO 2822.8 SQ. FT



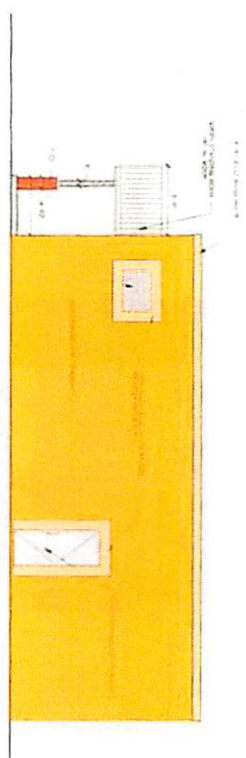
WEST ELEVATION
SCALE: 1/8" = 1'-0"



NORTH ELEVATION
SCALE: 1/8" = 1'-0"



EAST ELEVATION
SCALE: 1/8" = 1'-0"



SOUTH ELEVATION
SCALE: 1/8" = 1'-0"

Facade Beautification for Doral Centre Animal Hospital
 Owner: Doral Centre Animal Clinic, Inc.
 9400 NW 58th Street, Doral, FL 33178 - (305) 596-1234
 Project Location: 9400 NW 58th Street, Doral, FL 33178

CABRERA RAMOS
 ARCHITECT, INC.
 1100 S.W. 15th Street, Suite 200
 Fort Lauderdale, FL 33315
 Phone: (954) 572-1111
 Fax: (954) 572-1112
 Website: www.cabrera-ramos.com



DATE: 07/20/2014
 DRAWN: TMS
 CHECKED: TMS
 SCALE: 1/8" = 1'-0"
 SHEET: A-1.1



Work

Please provide a brief, general description of the work to be performed, materials to be used, color and material samples (if applicable).

- **Exterior Walls** (Includes façade (if applicable) structural, decorative and non-functional elements)

- **Siding**

- **Windows/Doors**

- **Awnings/Canopies**

- **Walls/Fencing**

- **Lighting**



- Painting
- ADA Improvements
- Signage/Detached Monument signage
- Sidewalk/Surface Parking Improvements
- Pedestrian Amenities
- Other Proposed Use



AFFIDAVIT OF FINANCIAL AND CONFLICT OF INTEREST

1. Do you have any past due financial obligations with the City of Doral?

	YES	NO
Single Family House Loans	_____	_____ ✓
Multi-Family Housing Rehab	_____	_____ ✓
CDBG Commercial Loan Project	_____	_____ ✓
U.S. HUD Funded Programs	_____	_____ ✓
Other (liens, fines, loans, Occupational licenses, etc.)	_____	_____ ✓

If YES, please explain:

2. Are you a relative of or do you have any business or financial interest with any elected City of Doral official, Employee, or Member of any Advisory Boards?

YES _____ NO

If yes, please explain:

Any false information provided on this affidavit will be reason for rejection and disqualification of your project-funding request to The City of Doral.

The answers to the foregoing questions are correctly stated to the best of my knowledge and belief.

By Arjane He Cabera Date 3-15-2019
(Print Name)

SUBSCRIBED AND SWORN TO (or affirmed) before me this 15 day of March 20 19

By [Signature] He/She is personally known to me or has presented
(Signature)

_____ as identification.
(Type of Identification)

[Signature]
(Signature of Notary)

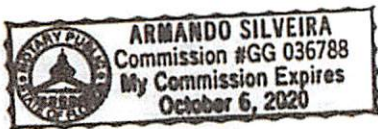
Armando Silveira
(Print or Stamp of Notary)

GG 036788
(Serial Number)

10-6-2020
(Expiration Date)

Notary Public- Stamp of Florida
(State)

Notary Seal



RESOLUTION No. 19-103

A RESOLUTION OF THE MAYOR AND THE CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, APPROVING THE AWARD OF FISCAL YEAR 2019 FAÇADE IMPROVEMENT GRANTS IN THE AMOUNT OF \$10,000.00 TO ISLANDS AT DORAL MASTER ASSOCIATION; \$10,000.00 TO PALMETTO WEST PARK CONDO ASSOCIATION; AND \$10,000.00 TO VETERINARY ACQUISITIONS; AND PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, the City of Doral provides financial assistance to businesses and commercial property owners in Doral through the Façade Improvement Grant in order to stimulate private sector investment, economic growth and the beautification of buildings within Doral; and

WHEREAS, the City of Doral received twelve (12) applications in response to the FY 19 Cycle of the Façade Improvement Grant; and

WHEREAS, after careful review of the applications, the Façade Improvement Grant Evaluation Committee respectfully recommends that the Mayor and City Council approves Façade Improvement Grant awards to each of the following organizations:

1. Islands at Doral Master Association- \$10,000.00
2. Palmetto West Park Condo Association- \$10,000.00
3. Veterinary Acquisitions - \$10,000.00

NOW, THEREFORE, BE IT RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, AS FOLLOWS:

Section 1. Approvals. The Mayor and the City Council of the City of Doral hereby approves a Façade award of \$10,000.00 to Islands at Doral Master Association, \$10,000.00 to Palmetto West Park Condo Association, and \$10,000.00 to Veterinary Acquisitions.

Section 2. Effective Date. This Resolution shall become effective immediately upon its adoption.

The foregoing Resolution was offered by Councilmember Cabrera who moved its adoption.

The motion was seconded by Councilmember Fraga and upon being put to a vote, the vote was as follows:

Mayor Juan Carlos Bermudez	Yes
Vice Mayor Claudia Mariaca	Yes
Councilwoman Digna Cabral	Yes
Councilman Pete Cabrera	Yes
Councilwoman Christi Fraga	Yes

PASSED AND ADOPTED this 10 day of April, 2019.




JUAN CARLOS BERMUDEZ, MAYOR

ATTEST:



CONNIE DIAZ, MMC
CITY CLERK

APPROVED AS TO FORM AND LEGAL SUFFICIENCY
FOR THE USE AND RELIANCE OF THE CITY OF DORAL ONLY:



LUIS FIGUEREDO, ESQ.
CITY ATTORNEY