UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 94-R-0009
   CUSTOMER NUMBER: 869

Universidad Central Del Carib
School Of Medicine
Call Box 60-327
Bayamon, PR 00960
Telephone: (787) -798-3001

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations

<table>
<thead>
<tr>
<th></th>
<th>B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not used for such purposes.</th>
<th>C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.</th>
<th>D. Number of animals upon which experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.</th>
<th>E. Number of animals upon which teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
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<td>N/A</td>
<td>N/A</td>
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<tr>
<td>6. Guinea Pigs</td>
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<td>N/A</td>
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</tr>
<tr>
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<td>N/A</td>
<td>N/A</td>
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</tr>
<tr>
<td>8. Rabbits</td>
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<td>N/A</td>
<td>N/A</td>
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</tr>
<tr>
<td>9. Non-human Primates</td>
<td>N/A</td>
<td>N/A</td>
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<td>10. Sheep</td>
<td>N/A</td>
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<td>N/A</td>
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<tr>
<td>11. Pigs</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>12. Other Farm Animals</td>
<td>N/A</td>
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<tr>
<td>13. Other Animals</td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

F. TOTAL NUMBER OF ANIMALS (COLUMNS C+D+E)

ASSURANCE STATEMENTS

1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2) Each principal investigator has considered alternatives to painful procedures.

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

APHIS FORM 7023
(Replaces VS Form 16-23 (ULC 80), which is obsolete)
## United States Department of Agriculture

**ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

### ANNUAL REPORT OF RESEARCH FACILITY

<table>
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</table>

#### 1. CERTIFICATE NUMBER: 94-R-0010

**CUSTOMER NUMBER:** 893

Ponce School Of Medicine
P.O. Box 7004
Ponce, PR 00732

Telephone: (787)-840-2575

### 3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

**FACILITY LOCATIONS (Sites) - See Attached Listing**

### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

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<tr>
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<th>A. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.</th>
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<th>TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)</th>
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</thead>
<tbody>
<tr>
<td>4. Dogs</td>
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<td>6. Guinea Pigs</td>
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<td>0</td>
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<td>0</td>
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<td>0</td>
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<tr>
<td>12. Other Farm Animals</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>13. Other Animals</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Rats</strong></td>
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<td>1,464</td>
<td>1,828</td>
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<td>0</td>
<td>1,828</td>
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<td><strong>Mice</strong></td>
<td>365</td>
<td>309</td>
<td>674</td>
<td>0</td>
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<td>674</td>
</tr>
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### ASSURANCE STATEMENTS

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4. The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

**SIGNED**

[Signature]

**DATE SIGNED:** 10/31/00

**NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL:** (Type or Print)

**LOCATION:**

---

**Interagency Report Control No.**

**Dated:** OCT 13 2000

**See attached form for additional information.**
United States Department of Agriculture
Animal and Plant Health Inspection Service

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 94-R-0012
2. CUSTOMER NUMBER: 870

San Juan Bautista School of Medicine
P.O. Box 4968
Caguas, PR 00726

Telephone: (787) 743-3038

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

DATE SIGNED

9/24/04
UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 94-R-0012
CUSTOMER NUMBER: 870

San Juan Bautista School Of Medicine
P.O.Box-74366-P O Box 4968
San Juan, PR 00936 Caguas, PR 00726-4968
Telephone: (787) 743-3038

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED 12/20/04
Column E Explanation

This form is intended as an aid to completing the Column E explanation. It is not an official form and its use is voluntary. Names, addresses, protocols, veterinary care programs, and the like, are not required as part of an explanation. A Column E explanation must be written so as to be understood by lay persons as well as scientists.

1. Registration Number: 94-R-0012

2. Number of animals used in this study.

3. Species (common name) of animals used in the study.

4. Explain the procedure producing pain and/or distress.

5. Provide scientific justification why pain and/or distress could not be relieved. State methods or means used to determine that pain and/or distress relief would interfere with test results. (For Federally mandated testing, see Item 6 below)

6. What, if any, federal regulations require this procedure? Cite the agency, the code of Federal Regulations (CFR) title number and the specific section number (e.g., APHIS, 9 CFR 113.102):

   Agency CFR

*No animals were used during the year 2004.*
UNIVERSITY OF PUERTO RICO - RIO PIEDRAS

ANNUAL REPORT OF RESEARCH FACILITY

1. CERTIFICATE NUMBER: 94-R-0103
   CUSTOMER NUMBER: 864

2. University Of Puerto Rico-Rio Piedras Ca
   Po Box 23360
   San Juan, PR 00931
   Telephone: (787) -764-0000

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

   FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

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<tr>
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</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>5. Cats</td>
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<tr>
<td>6. Guinea Pigs</td>
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<td>8. Rabbits</td>
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<tr>
<td>9. Non-human Primates</td>
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<tr>
<td>13. Other Animals</td>
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ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

(AUG 91)

(OCT 88), which is obsolete.
### ANNUAL REPORT OF RESEARCH FACILITY

#### (TYPE OR PRINT)

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<tr>
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<tr>
<td>13. Other Animals</td>
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</table>

#### ASSURANCE STATEMENTS

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### CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)

<table>
<thead>
<tr>
<th>NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)</th>
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<tbody>
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</table>
### ANNUAL REPORT OF RESEARCH FACILITY

#### (TYPE OR PRINT)

**UNITED STATES DEPARTMENT OF AGRICULTURE**

**ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

**Inter American Univ Of P R-Metropolitan**

**P.O. Box 191293**

**San Juan, PR 00919**

**Telephone: (809)-250-1912**

### 3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

**FACILITY LOCATIONS (Sites) - See Attached Listing**

### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

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<th>C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.</th>
<th>D. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain or distress to the animals.</th>
<th>E. Number of animals upon which teaching, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used</th>
<th>F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs</td>
<td>0</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>5. Cats</td>
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<td></td>
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<tr>
<td>6. Guinea Pigs</td>
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<td></td>
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<td></td>
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<tr>
<td>7. Hamsters</td>
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<tr>
<td>8. Rabbits</td>
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<tr>
<td>9. Non-human Primates</td>
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<tr>
<td>10. Sheep</td>
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<td></td>
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<tr>
<td>11. Pigs</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>12. Other Farm Animals</td>
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<td></td>
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<tr>
<td>13. Other Animals</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### ASSURANCE STATEMENTS

1. Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.

2. Each principal investigator has considered alternatives to painful procedures.

3. This facility is adhering to the standards and regulations under the Act, and it has had all exceptions to the standards and regulations specified and explained by the principal investigator and any Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes brief explanation of the exceptions, as well as the species and number of animals affected.

4. The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

### CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)

<table>
<thead>
<tr>
<th>NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)</th>
<th>DATE SIGNED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12/1/04</td>
</tr>
</tbody>
</table>
**ANNUAL REPORT OF RESEARCH FACILITY**

**Thl** report is **required by law (7 USC 2143). Failure to report according to the regulations can result in an or to cease and desist and to be subject to penalties as provided for in Section 21.**

**Interagency Report Control No.:**

See attached form for additional information.

---

**UNITED STATES DEPARTMENT OF AGRICULTURE**
**ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

**Annual Report of Research Facility**

( **Type or Print** )

---

**Interagency Report Control No.:**

See attached form for additional information.

---

**Certification Number:** 94-R-0111

**Customer Number:** 19118

Caribbean Bio Labs Inc
Po Box 325
San German, PR 00683

Telephone: (787) -892-2650

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**Facility Locations (Sites) - See Attached Listing**

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**Report of Animals Used by or Under Control of Research Facility** ( **Attach additional sheets if necessary or use APHIS Form 7023A** )

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**Animals Covered By The Animal Welfare Regulations**

**A.**

- Animals Covered By The Animal Welfare Regulations
- Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.

**B.**

- Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.

**C.**

- Number of animals upon which teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals.

**D.**

- Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.

**E.**

- Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research experiments, surgery, or tests. An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report.

**F.**

- Total number of animals ( **Columns C + D + E** )

---

**Assurance Statements**

1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual teaching, testing, surgery, or experimentation were followed by this research facility.

2) Each principal investigator has considered alternatives to painful procedures.

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

---

**Certification by Headquarters Research Facility Official**

( **Chief Executive Officer or Legally Responsible Institutional Official** )

( **Date Signed** )

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* From October 1, 2003 to November 30, 2004
### ANNUAL REPORT OF RESEARCH FACILITY

**TYPE OR PRINT**

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY**

**Caribbean Marine Mammal Laboratory**
**Universidad Metropolitana**

**FACILITY LOCATIONS**

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Animals Covered</strong></td>
<td></td>
</tr>
<tr>
<td>by The Animal Welfare Regulations</td>
<td></td>
</tr>
<tr>
<td>West Indian manatee</td>
<td>1 (in rehab)</td>
</tr>
<tr>
<td>Cats</td>
<td></td>
</tr>
<tr>
<td>Dogs</td>
<td></td>
</tr>
<tr>
<td>Guinea Pigs</td>
<td></td>
</tr>
<tr>
<td>Hamsters</td>
<td></td>
</tr>
<tr>
<td>Rabbits</td>
<td></td>
</tr>
<tr>
<td>Non-human Primates</td>
<td></td>
</tr>
<tr>
<td>Sheep</td>
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</tr>
<tr>
<td>Pigs</td>
<td></td>
</tr>
<tr>
<td>Other Farm Animals</td>
<td></td>
</tr>
<tr>
<td>Other Animals</td>
<td></td>
</tr>
</tbody>
</table>

### ASSURANCE STATEMENTS

1. Professionally acceptable standards governing the care, treatment, and use of animals including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during and following actual research, teaching, testing, surgery, or experimentation were followed by this research faculty.

2. Each principal investigator has considered alternatives to painful procedures.

3. The facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4. The attending veterinarians for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

### CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

Executive Officer or Legally Responsible Institutional Official

Certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

**DATE SIGNED**

8 Dec 2004

8-23 (OCT 66) which is obsolete
This report is required by law (7 USC 2143) Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2160.

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

Annual Report of Research Facility
(TYPE OR PRINT)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY

1. REGISTRATION NO. 94-R-0112
2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA Includes Zip Code)
   Caribbean Marine Mammal Laboratory
   PO Box 21150
   San Juan PR 00928
   TEL 787-766-1717

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)
   Punta Salinas Radar Site
   Manatee Re-introduction sea pen

4. Animals Covered by The Animal Welfare Regulations
   A. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purpose
   B. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs
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   E. Number of animals upon which teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used
   F. TOTAL NO. OF ANIMALS

   (Cols. C + D + E)

   4. Dogs
   5. Cats
   6. Guinea Pigs
   7. Hamsters
   8. Rabbits
   9. Non-human Primates
   10. Sheep
   11. Pigs
   12. Other Farm Animals
   13. Other Animals

   West Indian manatee 1 (released on 23 Dec 2004)

ASSURANCE STATEMENTS

1) Professionally acceptable standards governing the care, treatment, and use of animals including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)
I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

NAME & TITLE OF CEO OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

8 Dec 2004

18-23 (OCT 86) which is obsolete
**ANNUAL REPORT OF RESEARCH FACILITY**

**TYPE OR PRINT**

---

1. CERTIFICATE NUMBER: 94-R-0113

   CUSTOMER NUMBER: 25170

   Pace Analytical Services Inc
   Po Box 325
   San German, PR 00683
   Telephone: (787) -892-2650

2. **REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY**

   (Attach additional sheets if necessary or use APHIS Form 7023A)

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<tr>
<td>Hamsters</td>
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<td>Rabbits</td>
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<td>Non-human Primates</td>
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**CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL**

(Chief Executive Officer or Legally Responsible Institutional Official)

**DATE SIGNED**

11-29-04

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*From Dec 1, 2003 to Sept 30, 2004*