2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H02395

FILED Apr 22, 2004 Secretary of State

Entity Name: NAVARRO DISCOUNT PHARMACIES NO. 4, INC. **Current Principal Place of Business: New Principal Place of Business:** 8760 SW 40TH STREET MIAMI, FL 33165 US **Current Mailing Address: New Mailing Address:** 5959 NW 37TH AVENUE MIAMI, FL 33142 FEI Number: 59-2422314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NAVARRO, MARCEL L NAVARRO, MARCEL L DVPST 5959 NW 37TH AVENUE 5959 NW 37TH AVENUE MIAMI, FL 33142 MIAMI, FL 33142 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: MARCEL L. NAVARRO 04/22/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition NAVARRO, JOSE F Name: Name: 5959 NW 37TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: Title: DVP Title: () Change () Addition () Delete Name: NAVARRO, LUIS G Name: 5959 NW 37TH AVENUE Address: Address: MIAMI, FL 33142 City-St-Zip: City-St-Zip: DVPS Title: Title: () Delete DVPS (X) Change () Addition NAVARRO, MARCEL L Name: NAVARRO, MARCEL L DVPST Name: 5959 NW 37TH AVENUE 5959 NW 37TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 33142 Title: DVP () Delete Title: () Change () Addition NAVARRO, GABRIEL L Name: Name: Address: 5959 NW 37TH AVENUE Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARCEL L. NAVARRO DVST 04/22/2004