

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H07652

FILED  
Jul 03, 2004  
Secretary of State

Entity Name: D & K DRUGS, INC.

**Current Principal Place of Business:**

1209 DELAWARE AVE  
FT PIERCE, FL 34950 US

**New Principal Place of Business:**

**Current Mailing Address:**

1209 DELAWARE AVE  
FT PIERCE, FL 34950 US

**New Mailing Address:**

2025 MIMOSA AVE  
FT PIERCE, FL 34949 US

FEI Number: 59-2424416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GORMAN, ROBERT J.  
1209 DELAWARE AVE  
FT. PIERCE, FL 34950 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SIANO, DOMINIC,  
Address: 2025 MIMOSA AVE.  
City-St-Zip: FT PIERCE, FL 34949

Title: STD ( ) Delete  
Name: SIANO, KATHY,  
Address: 2025 MIMOSA AVE.  
City-St-Zip: FT PIERCE, FL 34949

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: KATHY SIANO

TREA

07/03/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date