

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000094069

Entity Name: APOTHECARY PHARMACY LLC

**FILED**  
**Feb 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4749 34TH STREET SOUTH  
ST. PETERSBURG, FL 337112068 US

**New Principal Place of Business:**

**Current Mailing Address:**

4749 34TH STREET SOUTH  
ST. PETERSBURG, FL 337112068 US

**New Mailing Address:**

FEI Number: 27-3473808

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALAME, SAHAR A  
6675 83RD AVENUE N  
PINELLAS PARK, FL 337812068 US

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

SALAME, SAHAR A  
4749 34TH STREET SOUTH  
ST. PETERSBURG, FL 33711 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:

02/09/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SALAME, SAHAR A  
Address: 4749 34TH ST S.  
City-St-Zip: ST. PETERSBURG, FL 33711 US

Title: MGRM  
Name: BAYDOUN, EMAD H  
Address: 4749 34TH ST SOUTH  
City-St-Zip: ST PETERSBURG, FL 33711 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SAHAR SALAME

MGRM

02/09/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date