

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000165635

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** LATIN AMERICA PHARMA SUPPLY, INC.

**Current Principal Place of Business:**

20215 VINTAGE OAKS PLACE  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

20215 VINTAGE OAKS PLACE  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 20-2747858

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DI MARE VOLIO, LUIGI G. M  
20215 VINTAGE OAKS PLACE  
TAMPA, FL 33647 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DI MARE BADILLA, LUIS GUSTAVO  
Address: 20215 VINTAGE OAKS PLACE  
City-St-Zip: TAMPA, FL 33647

I hereby 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 all other like empowered.

SIGNATURE: GUSTAVO DI MARE

PRES

01/06/2011

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

\_\_\_\_\_ Date