2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# P08000085455

Entity Name: PHYSICIAN PREFERRED PHARMACY.INC

Current Principal Place of Business:

1326 NORTH STATE ROAD 7
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

6084 NW 75TH CT
PARKLAND, FL 33067

New Mailing Address:

1326 NORTH STATE ROAD 7
MARGATE, FL 33063

FEI Number: 26-3373758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAPLAN, LORI
1326 NORTH STATE ROAD 7
MARGATE, FL 33063 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KAPLAN, LORI
Address: 6084 NW 75TH CT
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LORI KAPLAN PRES 04/22/2009

Electronic Signature of Signing Officer or Director — Date