2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000080577

Entity Name: STRATEGIC PHARMA SERVICES, INC.

FILED Mar 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2853 EXECUTIVE PARK DR 2853 EXECUTIVE PARK DR WESTON, FL 33331

SUITE 102

WESTON, FL 33331

Current Mailing Address: New Mailing Address:

PO BOX 266366

WESTON, FL 33326 US

FEI Number: 65-0614755 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:

GARCIA, BLANCA GARCIA, BLANCA 2853 EXECUTIVE PARK DR 2853 EXECUTIVE PARK DR SUITE 102 SUITE 202 WESTON, FL 33331 US WESTON, FL 33331 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: 03/17/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

Name: GARCIA, BLANCA Name: GARCIA, BLANCA

2853 EXECUTIVE PARK DR, STE 202 2853 EXECUTIVE PARK DR, STE # 102 Address: Address:

City-St-Zip: WESTON, FL 33331 US City-St-Zip: WESTON, FL 33331 US

Title: DΡ () Delete Title: DP (X) Change () Addition

FINOL, MARIANNA Name: FINOL, MARIANNA Name:

2853 EXECUTIVE PARK DR STE 202 Address: 2853 EXECUTIVE PARK DR STE #102 Address: FORT LAUDERDALE, FL 33331 FORT LAUDERDALE, FL 33331 City-St-Zip: 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: MARIANA FINOL DP 03/17/2009