

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92897

Entity Name: VISA PHARMACY AND DISCOUNT STORE INC.

Current Principal Place of Business:

1390 SOUTH DIXIE HIGHWAY SUITE 1200
CORAL GABLES, FL 33146

Current Mailing Address:

2100 SALZEDO STREET
SUITE 300
CORAL GABLES, FL 33134 US

FEI Number: 59-2231205

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARAZOZA & FERNANDEZ-FRAGA, P.A.
2100 SALZEDO STREET
SUITE 300
CORAL GABLES, FL 33134 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title COB
Name GUERRA, ARMANDO J
Address 1390 SOUTH DIXIE HIGHWAY SUITE
1200
City-State-Zip: CORAL GABLES FL 33146

Title SVD
Name GUERRA, ALBERTO
Address 1390 SOUTH DIXIE HIGHWAY SUITE
1200
City-State-Zip: CORAL GABLES FL 33146

Title P
Name CUERVO, LEONCIO
Address 1390 SOUTH DIXIE HIGHWAY SUITE
1200
City-State-Zip: CORAL GABLES FL 33146

Title D
Name DIAZ, JOSE F
Address 1390 SOUTH DIXIE HIGHWAY SUITE
1200
City-State-Zip: CORAL GABLES FL 33146

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: ARMANDO J GUERRA

COB

02/12/2015

Electronic Signature of Signing Officer/Director Detail

Date