

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000029912

Entity Name: VIVI PHARMACY LLC.

Current Principal Place of Business:

1250 NW 7TH STREET, SUITE 101-102
MIAMI, FL 33125

Current Mailing Address:

1250 NW 7TH STREET, SUITE 101-102
MIAMI, FL 33125

FEI Number: 45-0704420

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEL RIO, LAZARO
1250 NW 7TH STREET, SUITE 101-102
MIAMI, FL 33125 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

Authorized Person(s) Detail :

Title MGRM
Name DEL RIO, LAZARO
Address 1250 NW 7TH STREET, SUITE 101-102

City-State-Zip: MIAMI FL 33125

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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAZARO DEL RIO

MANAGER

04/01/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date