

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000175268

Entity Name: RELIABLE PHARMACY, LLC***** SEE NOTE

Current Principal Place of Business:

1757 B SAN MARCO BOULEVARD
MARCO ISLAND, FL 34145

Current Mailing Address:

10232 NW 46TH STREET
SUNRISE, FL 33351

FEI Number: 46-4495434

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRAGER, ROSS
11011 SHERIDAN STREET
COOPER CITY, FL 33026 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 FRANK, HOWARD
Address 10232 NW 46TH STREET
City-State-Zip: SUNRISE FL 33351

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

SIGNATURE: HOWARD FRANK

MANAGER

03/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date