## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 223329** 

FILED Jul 22, 2009 Secretary of State

Entity Name	e: MIAMI SPRII	NGS PHARMACY INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
% JOHN STA 45 CURTISS MIAMI SPRIN					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
% JOHN STA 45 CURTISS MIAMI SPRIN					
FEI Number: 59	9-0868334 I	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and A	Address of Cur	rent Registered Agent:	Name and Address	of New Registered Agent:	
STADNIK, JOHN 485 DEER RUN MIAMI SPRINGS, FL 33166 US			DODGEN, CAROL 485 DEER RUN MIAMI SPRINGS, FL	33166 US	
The above no in the State o		mits this statement for the pu	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: CAROL DODGEN				07/22/2009	
	Electronic	Signature of Registered Ager	nt	Date	
		(b), F.S., the corporation did not rust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Name: [ Address: 6	PD () De DODGEN, CAROL 6400 NW 41 ST MIAMI SPRINGS, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: S Address: 4	S () De STADNIK, CATHER 485 DEER RUN MIAMI SPGS., FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: CAROL DODGEN PD 07/22/2009