

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLOIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 258395 (3)
1. Corporation Name
WASHINGTON DRUG COMPANY



Principal Place of Business: % FEDCO. INC., 629 71ST ST. P.O. BOX 414258 MIAMI BEACH FL 33141
Mailing Address: % FEDCO. INC., 629 71ST ST. P.O. BOX 414258 MIAMI BEACH FL 33141

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	629 71st Street	26	629 71st Street	04/25/1962	05/01/1995
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	4. FEI Number	Applied For / Not Applicable
23	City & State	28	City & State	59-0970081	
24	Zip	29	Zip	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	Country	30	Country	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
RUSKIN, LLOYD L 629 71ST ST. P.O. BOX 414258 MIAMI BEACH FL 33141				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
RUSKIN, LLOYD L 629 71ST ST. P.O. BOX 414258 MIAMI BEACH FL 33141		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	629 71st Street
		83	
		84 City	MIAMI BEACH
		85 Zip Code	33141

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VCD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSKIN, LLOYD L.	1.2 NAME	
STREET ADDRESS	629 71ST ST	1.3 STREET ADDRESS	629 71st Street
CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	
TITLE	ASD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULTACK, JO ELLEN	2.2 NAME	
STREET ADDRESS	629 71ST ST	2.3 STREET ADDRESS	629 71st Street
CITY-ST-ZIP	MIAMI BEACH FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIDSON, ISABEL	3.2 NAME	
STREET ADDRESS	629 71ST ST	3.3 STREET ADDRESS	629 71st Street
CITY-ST-ZIP	MIAMI BEACH FL	3.4 CITY-ST-ZIP	
TITLE	CDT	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIDSON, JOSEPH H	4.2 NAME	
STREET ADDRESS	629 71ST ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULTACK, WILLIAM	5.2 NAME	
STREET ADDRESS	629 71ST ST	5.3 STREET ADDRESS	629 71st Street
CITY-ST-ZIP	MIAMI BEACH FL	5.4 CITY-ST-ZIP	
TITLE	ASD	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSKIN, CANDACE	6.2 NAME	
STREET ADDRESS	629 71ST ST	6.3 STREET ADDRESS	629 71st Street
CITY-ST-ZIP	MIAMI BEACH FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ VICE CHAIRMAN 4-11-96 (305) 865-4482

CR2E034 (12/95)