

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 403347

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** GOODMAN DRUGS, INC.

**Current Principal Place of Business:**

1234 NE 4TH AVENUE  
SUITE C  
FT. LAUDERDALE, FL 333117235 US

**New Principal Place of Business:**

1234 NE 4TH AVENUE  
SUITE C  
FT. LAUDERDALE, FL 333041925 US

**Current Mailing Address:**

1234 NE 4TH AVENUE  
SUITE C  
FT. LAUDERDALE, FL 333117235 US

**New Mailing Address:**

1234 NE 4TH AVENUE  
SUITE C  
FT. LAUDERDALE, FL 333041925 US

**FEI Number:** 59-1399391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GLASSER, ELAINE G.  
708 NE 20TH DRIVE  
WILTON MANORS, FL 33305 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PVP  
Name: GLASSER, ELAINE G  
Address: 708 NE 20TH DR  
City-St-Zip: WILTON MANORS, FL 333052220

Title: ST  
Name: GLASSER, MICHELLE W  
Address: 708 NE 20TH DR  
City-St-Zip: WILTON, FL 333052220

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: ELAINE G GLASSER

PRES

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date