

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 457207

Entity Name: MY PHARMACY, INC.

FILED  
Jan 04, 2010  
Secretary of State

## Current Principal Place of Business:

806 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

## New Principal Place of Business:

## Current Mailing Address:

806 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

## New Mailing Address:

FEI Number: 59-1543884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WARSHOFSKY, GERALD  
15043 SOUTH DIXIE HIGHWAY  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

WARSHOFSKY, GERALD  
806 NORTH KROME AVENUE  
HOMESTEAD, FL 33030 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: DAVID WARSHOFSKY

01/04/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: WARSHOFSKY, GERALD  
Address: 806 NORTH KROME AVENUE  
City-St-Zip: HOMESTEAD, Q 33030

Title: ST  
Name: SMITH, ORIN  
Address: 806 NORTH KROME AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

Title: V  
Name: WARSHOFSKY, DAVID  
Address: 806 NORTH KROME AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

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: DAVID WARSHOFSKY

V

01/04/2010

Electronic Signature of Signing Officer or Director

Date