FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 31 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 835602 (4)

1. Corporation Name

Superx Drugs Corporation

800001504578
-06/02/95--01033--022
****225.00 ****225.00

Principal Place of Business	Mailing Address
1014 Vine Street Cincinnati, OH 45202-1100	1014 Vine Street Cincinnati, OH 45202-1100

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 12/23/75
3a. Date of Last Report: 09/21/94

4. FEI Number: 38-0900860 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT Corporation System 8751 W. Broward Blvd. Plantation, FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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 _____ (A) If Registered Agent signature required when reinstating) (DATE)
Signature, type or printed name of registered agent, and title if applicable

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President/Asst. Secretary/Director	11 TITLE	☐ Change ☐ Addition
NAME	Heldman, Paul W.	12 NAME	
STREET ADDRESS	1014 Vine Street	13 STREET ADDRESS	
CITY ST ZIP	Cincinnati, OH 45202-1100	14 CITY ST ZIP	
TITLE	Vice President/Director	21 TITLE	☐ Change ☐ Addition
NAME	O'Brien, Thomas P.	22 NAME	
STREET ADDRESS	1014 Vine Street	23 STREET ADDRESS	
CITY ST ZIP	Cincinnati, OH 45202-1100	24 CITY ST ZIP	
TITLE	Secretary/Director	31 TITLE	☐ Change ☐ Addition
NAME	Gack, Bruce M.	32 NAME	
STREET ADDRESS	1014 Vine Street	33 STREET ADDRESS	
CITY ST ZIP	Cincinnati, OH 45202-1100	34 CITY ST ZIP	
TITLE	Treasurer	41 TITLE	☐ Change ☐ Addition
NAME	Turner, Lawrence M.	42 NAME	
STREET ADDRESS	1014 Vine Street	43 STREET ADDRESS	
CITY ST ZIP	Cincinnati, OH 45202-1100	44 CITY ST ZIP	
TITLE	Assistant Treasurer	51 TITLE	☐ Change ☐ Addition
NAME	Case, Kenneth E.	52 NAME	
STREET ADDRESS	1014 Vine Street	53 STREET ADDRESS	
CITY ST ZIP	Cincinnati, OH 45202-1100	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	5/31/95 MSP

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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: _____ Kenneth E. Case, Asst. Treas. 5/15/95 (513)762-4409
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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SUPERX DRUGS CORPORATION
175 TRI-COUNTY PARKWAY
CINCINNATI, OH 45246
FEDERAL I.D. #38-0900860

OFFICERS

Title/Name	Social Security #	Address
Pres./Asst. Sec. - Paul W. Heldman	296-40-9696	1014 Vine St , Cincinnati, OH 45202-1100
Sec. - Bruce M. Gack	253-94-2285	1014 Vine St., Cincinnati, OH 45202-1100
V.P.- Thomas P. O'Brien	233-50-5244	1014 Vine St., Cincinnati, OH 45202-1100
Treas. - Lawrence M. Turner	415-74-5974	1014 Vine St., Cincinnati, OH 45202-1100
Asst. Treas. - Kenneth E. Case	280-44-6790	1014 Vine St., Cincinnati, OH 45202-1100

DIRECTORS

Bruce M. Gack
Paul W. Heldman
Thomas P. O'Brien