F05000000376

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| (Requestor's Name) | _ |
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| (Address) | |
| (Address) | _ |
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| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| - · | _ |
| (Business Entity Name) | |
| | _ |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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Office Use Only



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02/20/07

COVER LETTER

TO: Amendment Section Division of Corporations

| (Name of Corporation) |
|---|
| DOCUMENT NUMBER: F05000000376 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Annette Finch (Name of Contact Person) |
| (1 mile 01 0 miles) |
| Corporate Direct, Inc. (Firm/Company) |
| 2248 Meridian Blvd. Ste H (Address) |
| Minden Nevada 89423 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Annette Finch at (775) 782-1302 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a \$35.00 check made payable to the Department of State. |
| Mailing Address: Amendment Section Street Address: Amendment Section |

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of NEVADA in order to change its registered office or registered agent, or both, in the State of Florida. |
|--|
| The name of the corporation: DRUGISTIC PHARMACEUTICALS AND MATERIAL MEDICINES, INC. |
| The principal office address: 2248 MERIDIAN BLVD. STE H MINDEN NV 89423 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 01/12/2005 Document number: F05000000376 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| MALLER, KAREN |
| ONE PROGRESS PLAZA NO. 1210 |
| ST. PETERSBURG, FL 33701 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| GERRI DETWEILER |
| 1037 GREYSTONE LANE (P.O. Box NOT acceptable) |
| GERRI DETWEILER 1037 GREYSTONE LANE (P.O. Box NOT acceptable) SARASOTA, FL 34232 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. |
| Wen Yeng Chi (Signature of n officer of director) Wen Yeng Chi (Printeg of typed name and title) |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| Signature of Registered Agent) 2-7-07 (Date) |
| If signing on behalf of an entity: |
| Lyn Millard, Corporate Direct, Inc. (Typed or Printed Name) |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *