

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F07000001260

Entity Name: FARMACIA B-12 INC

**FILED**  
**Oct 08, 2008**  
**Secretary of State****Current Principal Place of Business:**454 NW 22ND AVENUE  
SUITE 102  
MIAMI, FL 33125**New Principal Place of Business:**4660 SW 74 AVENUE  
MIAMI, FL 33155**Current Mailing Address:**454 NW 22ND AVENUE  
SUITE 102  
MIAMI, FL 33125**New Mailing Address:**4660 SW 74 AVENUE  
MIAMI, FL 33155

FEI Number: 66-0424743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**ZAYAS, DALIA  
454 NW 22ND AVENUE  
SUITE 102  
MIAMI, FL 33125 US**Name and Address of New Registered Agent:**CELIDA, GARCIA  
4660 SW 74 AVENUE  
MIAMI, FL 33155 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: CELIDA GARCIA

10/08/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: C ( ) Delete  
Name: ZAYAS, DALIA  
Address: 4648 SW 74 AVE  
City-St-Zip: MIAMI, FL 33155**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change ( ) Addition  
Name: GARCIA, CELIDA  
Address: 4660 SW 74 AVENUE  
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CELIDA GARCIA

D

10/08/2008

Electronic Signature of Signing Officer or Director

Date