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 -1 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F77653** **(6)**

1. Corporation Name

SPENCER DRUG COMPANY

Principal Place of Business

% FEDCO INC., 629 71ST ST.
P.O. BOX 414258
MIAMI BEACH FL 33141

Mailing Address

% FEDCO INC., 629 71ST ST.
P.O. BOX 414258
MIAMI BEACH FL 33141

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/26/1982

3a. Date of Last Report: 07/22/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 Country — 25

Zip — 29 Country — 30

4. FEI Number: 59-2233406 — 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

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

9. Name and Address of Current Registered Agent

RUSKIN, LLOYD L
629 71ST ST.
P.O. BOX 414258
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	☐ Change ☐ Addition
NAME	DAVIDSON, ISABEL	1.2 NAME	
STREET ADDRESS	629 71ST ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	1.4 CITY - ST - ZIP	
TITLE	CTD	2.1 TITLE	☐ Change ☐ Addition
NAME	DAVIDSON, JOSEPH	2.2 NAME	
STREET ADDRESS	629 71ST ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	2.4 CITY - ST - ZIP	
TITLE	ASD	3.1 TITLE	☐ Change ☐ Addition
NAME	RUSKIN, CANDACE	3.2 NAME	
STREET ADDRESS	629 71ST ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	3.4 CITY - ST - ZIP	
TITLE	ASD	4.1 TITLE	☐ Change ☐ Addition
NAME	MULTACK, JOELLEN	4.2 NAME	
STREET ADDRESS	629 71ST ST	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	4.4 CITY - ST - ZIP	
TITLE	VCD	5.1 TITLE	☐ Change ☐ Addition
NAME	RUSKIN, LLOYD L	5.2 NAME	
STREET ADDRESS	629 71ST ST	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	5.4 CITY - ST - ZIP	
TITLE	PD	6.1 TITLE	☐ Change ☐ Addition
NAME	MULTACK, WILLIAM	6.2 NAME	
STREET ADDRESS	629 71ST ST	6.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual 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: LLOYD L. RUSKIN, VICE CHAIRMAN OF THE BOARD AND GENERAL COUNSEL — 4/10/95 — 305-865-4482

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — VICE CHAIRMAN OF THE BOARD AND GENERAL COUNSEL

0160187 CP