

F96000006751

CORPORATION SYSTEM

FILED  
02 SEP -9 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 5, 2002

RE: PRIME MED PHARMACY SERVICES, INC. (DE. DOM.)

RA  
Resignation

Secretary of State  
Corporate Records Bureau  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

200007610392--6  
-09/10/02--01010--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is 1 check in the amount of 87.50 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

*Theresa Alfieri*  
Theresa Alfieri  
Senior Supervisor &  
Assistant Secretary

TA:ld  
Enclosure

111 Eighth Avenue  
New York, NY 10011  
Tel. 212 894 8940  
Fax 212 590 9180

RA  
9/17/02

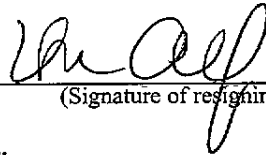
## RESIGNATION OF REGISTERED AGENT

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.609,  
Florida Statutes, the undersigned, C T CORPORATION SYSTEM  
(Name of registered agent)  
hereby resigns as Registered Agent for PRIME MED PHARMACY SERVICES, INC. @9600000470  
(DE. DOM.)  
(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.



(Signature of resigning agent)

If signing on behalf of an entity:

C T CORPORATION SYSTEM - Theresa Alfieri  
(Typed or Printed Name)

ASSISTANT SECRETARY  
(Capacity)

### **Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

**Make checks payable to Florida Department of State and mail to:**  
**Division of Corporations**  
**P.O. Box 6327**  
**Tallahassee, FL 32314**

CR2E046(9/98)