

**2006 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F96995

**FILED  
Jan 03, 2006  
Secretary of State**

**Entity Name:** DESOTO PHARMACY, INC.

**Current Principal Place of Business:**

823 SOUTHERN BLVD.  
W PALM BCH, FL 33405

**New Principal Place of Business:**

**Current Mailing Address:**

823 SOUTHERN BLVD.  
W PALM BCH, FL 33405

**New Mailing Address:**

**FEI Number:** 59-2211824      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOTO, MARIA ANTONIA  
823 SOUTHERN BLVD  
WEST PALM BEACH, FL 33405      US

**Name and Address of New Registered Agent:**

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: MARIA ANTONIA SOTO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: TS      ( ) Delete  
Name: SOTO, FERNANDO F.,  
Address: 11348 TORCHWOOD CT.  
City-St-Zip: WELLINGTON, FL 33414

Title: OS      ( ) Delete  
Name: SOTO, MARIA ANTONIA  
Address: 823 SOUTHERN BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33405

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SOTO, FERNANDO F.

TS

01/03/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date