2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE OF PRINTED HAME OF BIGHING DIFFICEA OR DIRECT

SIGNATURE: _

F9800005361 ****

DOCUMENT #

FILED Aug 11, 2002 8:00 am Secretary of State 08-11-2002 90171 022 ***550.00

251-471-5445

1. Entity Na				•			08-11-2002 90			
COX N	UCLEAR P	PHARMACY, INC.								
Principal Pl	face of Busines		Mailing Address							
2420 -2 EXT	ECUTIVE PLAZ	A	28616 DAUPHIN S							
PENSACOL	SACOLA FL 32503		K							
			MOBILE AL 36606	6			A CENTRAL PROFESSION AND REPORTED A	88(14 64 (14 86 1(1 6	8182 81288 62	ilië Gicht mas in:
2. Principal	Place of Busin	ness	3. Mailing Address			[
			825 Execu	itise Park	c Dr.	ĺ	s rousen rita inter (6th) Câlit	naint Baith Bhill B'	DFØ1 Ø5(00)	IILO BIJAK ILAD (A)
Suite, Ap	Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Sta	City & State		Mobile AL			4.	DO 1004375			Applied For
Zip		Country	Zip 3u60 b	Coun	ntry	5.	Certificate of Status Desired			Not Applicat
	6. Name	and Address of Current I			T = .		Name and Address of New	. T .F	ee Requi	ired
					Name		Harrie Bio Modress Of New	Hegistered A	gent >:	
	GOMERY, MII				Street A	ddress (P.O. F	Box Number is Not Acceptab			
	executive p OLA FL 3251						Sox redifficer is Not Acceptable	I 0)		
PENSAL	ULA FL 3231	13		ľ	<u> </u>					
			•		City			FI	Zip Co	de
I. The above	named entity	submits this statement for	the purpose of chang	ging its registers	ed office or	registered ag	ent, or both, in the State of Flo	Orida Lam fe	miliar with	2 224 222
	Mona or registe	neu agent.						onou. Fulling	LINING! WILL	n, and accep
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GNATURE.	Signature, typed o	or printed name of registered agent an	nd title if applicable.	(NOTE: Registered	_	required when re	instating)	DATE		
GIGNATURE	Signature, typed of oration is eligib	or printed name of registered agent an	FILE N	NOW!!! FEE	Agent signatu	ite required when re				<u> </u>
Tax filing	Signature, typed of oration is eligib	or printed name of registered agent an	FILE N	NOW!!! FEE ber 13, 2002 F	i Agent signatu IS \$550.4	are required when re	10. Election Campaign Fir Trust Fund Contributio	nancing	\$5.0	00 May Be
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FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

July 31, 2002

COX NUCLEAR PHARMACY, INC. 825 EXECUTIVE PARK DR MOBILE, AL 36606

Subject: COX NUCLEAR PHARMACY, INC.

Reference Number:

F98000005361

676653

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/JC

ANNUAL REPORTS SECTION

Bibado algunang se sara ya ur ebuah padarah padas (wilds dis 1981) at sepuai brahim a Usah ass rapada