2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G80049

Entity Name: CANADAY'S PHARMACY, INC.

FILED Dec 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

271 BERMUDA BEACH DR. 5304 STATELY OAK STREET FORT PIERCE, FL 349491527 US FORT PIERCE, FL 34981 US

Current Mailing Address: New Mailing Address:

271 BERMUDA BEACH DR. 5304 STATELY OAKS STREET FORT PIERCE, FL 349491527 US FORT PIERCE, FL 34981 US

FEI Number: 59-2368207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WETMORE, JOHN W.

271 BERMUDA BEACH DR.

FORT PIERCE, FL 349491527 US

WETMORE, JOHN W.

5304 STATELY OAKS STREET
FORT PIERCE, FL 34981 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: JOHN W. WETMORE 12/03/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition WETMORE, JOHN W., WETMORE, JOHN W., Name: Name: 271 BERMUDA BEACH DR. 5304 STATELY OAKS STREET Address: Address: City-St-Zip: FORT PIERCE, FL 349491527 City-St-Zip: FORT PIERCE, FL 34981

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 WETMORE, JUDY C.,
 Name:
 WETMORE, JUDY C.,

 Address:
 271 BERMUDA BEACH DR.
 Address:
 5304 STATELY OAKS STREET

 City-St-Zip:
 FORT PIERCE, FL 349491527
 City-St-Zip:
 FORT PIERCE, FL 34981

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUDY C. WETMORE SEC 12/03/2004