11/30/98

# FORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

1:33 PM

(((H98000022258 1)))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4000

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: GERSON'S DRUGS FARMACIA, CORP.

AUDIT NUMBER.....H98000022258
DOC TYPE.....BASIC AMENDMENT

CERT. OF STATUS...0

PAGES..... 4

DEL.METHOD.. FAX

CERT. COPIES.....0

EST.CHARGE.. \$35.00

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>: Help F1 Option Menu F2

NUM CAPS Connect: 00:01:48

RECEIVED
98 DEC -1 PH 4123
MISHEN OF CORPORATIONS

98 DEC -1 PM 4: 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC-01-1338 19:15

EMPIRE CORP

11/30/98

## FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

1:33 PM

(((H98000022258 1)))

DIVISION OF CORPORATIONS TO:

FAX #: (850)922-4000

FROM: EMPIRE CORPORATE KIT COMPANY

072450003255 ACCT#:

CONTACT: RAY STORMONT PHONE: (305) 541-3694

FAX #: (305)541-3770

NAME: GERSON'S DRUGS FARMACIA, CORP. AUDIT NUMBER...... H98000022258

DOC TYPE.....BASIC AMENDMENT

CERT. OF STATUS..0

PAGES....

FAX DEL METHOD . .

CERT. COPIES.....0

\$35.00 EST.CHARGE..

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>: Help F1 Option Menu F2

NUM CAPS Connect: 00:01:48

EIVISION OF CORFORATIONS 98 DEC - 1 Killi:

11/30/98

# FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

1:33 PM

(((H98000022258 1)))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4000

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: GERSON'S DRUGS FARMACIA, CORP.

AUDIT NUMBER.....H98000022258
DOC TYPE......BASIC AMENDMENT

CERT. OF STATUS...0

PAGES..... 4

DEL.METROD.. FAX

CERT. COPIES.....0

EST.CHARGE.. \$35.00

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>: Help F1 Option Menu F2

NUM CAPS Connect: 00:01:48

RECEEDING 1: 55
59 NOV 30 PM 1: 55
MISICH OF CONTORNATIONS



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 1, 1998

GERSON'S DRUGS FARMACIA, CORP. 8157 SW 40TH STREET MIAMI, FL 33155-6746

SUBJECT: GERSON'S DRUGS FARMACIA, CORP.

REF: K30797

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please list a title for LUIS ALBERTO DISLA in Article IX.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell Corporate Specialist FAX Aud. #: H98000022258 Letter Number: 198A00056874

#### ARTICLES OF AMENDMENT

1198000022758

GERSON'S DRUGS FARMACIA, CORP.

1. Articles VI, VIII, IX AND X of the Articles of Incorporation of GERSON'S DRUGS FARMACIA, CORR, are hereby amended to read:

#### ARTICLE VI

The Registered Agent shall be: LUIS ALBERTO DISLA The registered address shall be: 8157 \$. W. 40th Street Miami, Florida

#### ARTICLE VIII

The name and post office address of the only member of the Board of Directors who shall hold office for the following Fears of the Corporation's existence, is as follows:

> LUIS ALBERTO DISLA 8157 S. W. 40th Street Mismi, Florida 33155

#### ARTICLE IX

The names and post office address of the only Officer of the Corporation who shall hold office for the following years of the Corporation's existence, is as follos:

> LUIS ALBERTO DISLA 8157 S. W. 40th Street Mismi, Florida 33155

President

### ARTICLE X

The names and post offices address of the only stockholder of the Corporation and the number of shares of stocks he owns, is as follows:

Name	Address	Number of shares
LUIS ALBERTO DISLA	8157 S. W. 40th Street	Sixty (60)

2. The foregoing amendments were adopted by the shareholders of this Corporation on November 20, A. D. 1998

IN WITNESS WHEREOF, the undersigned President of this Corporation

Gilberto V. Fort, Esq. - 1 -717 Poncede Leon Blvd. # 205 Coral Gables, FL 33134

(305) 443.0112 FBNO. 250856

· H980000 22258

## H98000022258

has executed these Articles of Amendments this 20th day of November

of A. D. 1998.

Fresident - Luis Alberto Disla

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, a Notary Fublic authorized to take acknowledgments in the State and County set forth above, personally appeared LUIS ALBERTO DISLA, who produced as identification Florida Driver's License No. D-240-521-77-303-0 and who executed the foregoing Articles of Amendments, and he acknowledged before me that he executed those Articles of Amendments.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal this 20th day of November of A. D. 1998.

State of Florida at Large

. . .

ZO.9 JATOT

493000022258

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as resident agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Registered Agent

November 20, A. D. 1998

+1980000222383