

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011352

Entity Name: PHARMACARE GROUP, L.L.C.

FILED
Jul 07, 2005
Secretary of State

Current Principal Place of Business:

6991 N.W. 82ND AVENUE
SUITE 15
MIAMI, FL 33166

New Principal Place of Business:

5680 GULF BREEZE PKWY
STE D106
GULF BREEZE, FL 32563

Current Mailing Address:

6991 N.W. 82ND AVENUE
SUITE 15
MIAMI, FL 33166

New Mailing Address:

6991 NW 82 AVE
#12
MIAMI, FL 33166

FEI Number: 02-0598389 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PADRON, MARCOS R
6991 N.W. 82ND AVENUE
SUITE 15
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

PADRON, MARCOS R
6991 NW 82 AVE
#12
MIAMI, FL 33166 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: MARCOS R PADRON

07/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PADRON, MARCOS R
Address: 6991 N.W. 82ND AVENUE, SUITE 15
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: VAN EATON, WESLEY
Address: 5680 GULF BREEZE PARKWAY, D-106
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PADRON, MARCOS R
Address: 6991 NW 82 AVE #12
City-St-Zip: MIAMI, FL 33166

Title: MGRM (X) Change () Addition
Name: VAN EATON, WESLEY O
Address: 5680 GULF BREEZE PKWY #D106
City-St-Zip: GULF BREEZE, FL 32563

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARCOS R PADRON

MMGR

07/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date