

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005375

FILED  
Jan 30, 2006  
Secretary of State

Entity Name: CANADIAN DISCOUNT DRUGS, LLC

## Current Principal Place of Business:

2787 EAST OAKLAND PARK BLVD.  
401  
FT. LAUDERDALE, FL 33306 US

## Current Mailing Address:

2787 EAST OAKLAND PARK BLVD.  
401  
FT. LAUDERDALE, FL 33306 US

## New Principal Place of Business:

2805 E. OAKLAND PARK BLVD  
302  
FT. LAUDERDALE, FL 33306 US

## New Mailing Address:

2805 E. OAKLAND PARK BLVD  
302  
FT. LAUDERDALE, FL 33306 US

FEI Number: 41-2095335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WISEMAN, ROBERT L  
2787 EAST OAKLAND PARK BLVD.  
401  
FT. LAUDERDALE, FL 33306 US

## Name and Address of New Registered Agent:

DUPLAIN, MICHELE  
2805 E. OAKLAND PARK BLVD  
302  
FT. LAUDERDALE, FL 33306 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: MICHELE DUPLAIN

01/30/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: WISEMAN, ROBERT L  
Address: 2787 E. OAKLAND PARK BLVD 401  
City-St-Zip: FT. LAUDERDALE, FL 33306

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: DUPLAIN, MICHELE  
Address: 2805 E. OAKLAND PARK BLVD #302  
City-St-Zip: FT. LAUDERDALE, FL 33306

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 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: MICHELE DUPLAIN

MGRM

01/30/2006

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