2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jul 18, 2008
Secretary of State

DOCUMENT# L04000080924

Entity Name: SUPERIOR PHARMACY LLC

Current Principal Place of Business:

7747 W. HILLSBOROUGH AV.
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

7747 W. HILLSBOROUGH AV.
TAMPA, FL 33615

New Mailing Address:

FEI Number: 20-2150271 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VICTOR, OBI
7747 W. HILLSBOROUGH AV
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

VICTOR, ANADIUME
7747 W. HILLSBOROUGH AV
TAMPA, FL 33615 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: VA 07/18/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: VICTOR, OBI
Address: 7747 W. HILLSBOROUGH AV
City-St-Zip: TAMPA, FL 33615

Title: MGR (X) Delete
Name: OKEKE, IKE
Address: 7747 W. HILLSBOROUGH AV
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MA MGR 07/18/2008

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