# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 07, 2009**
**Secretary of State**

DOCUMENT# L05000107817

**Entity Name:** A & H RX, LLC

**Current Principal Place of Business:**

12116 CORTEZ BLVD.
BROOKSVILLE, FL 34613

**New Principal Place of Business:**

**Current Mailing Address:**

12116 CORTEZ BLVD.
BROOKSVILLE, FL 34613

**New Mailing Address:**

**FEI Number: 20-3744920** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MUSCA, DANIEL G ESQ.
PHELPS DUNBAR LLP
12004 RACE TRACK RD
TAMPA, FL 33626 US

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

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: _____

Electronic Signature of Registered Agent — Date

**MANAGING MEMBERS/MANAGERS:**

| | | |
|---|---|---|
| Title: | MGR | ( ) Delete |
| Name: | ADIT, PATIDAR | |
| Address: | 8152 BRINEGAR CIR | |
| City-St-Zip: | TAMPA, FL 33647 | |
| Title: | MGRM | ( ) Delete |
| Name: | DUBAL, HEMAL | |
| Address: | 20014 NOB OAK AVE | |
| City-St-Zip: | TAMPA, FL 33647 | |
| Title: | MGR | ( ) Delete |
| Name: | PATIDAR, KIRIT | |
| Address: | 8152 BRINEGAR CIR | |
| City-St-Zip: | TAMPA, FL 33647I | |
| Title: | MGR | ( ) Delete |
| Name: | AMIN, CHIRAG | |
| Address: | 20014 NOB OAK AVE | |
| City-St-Zip: | TAMPA, FL 33647 | |

**ADDITIONS/CHANGES:**

| | | |
|---|---|---|
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| 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: KIRIT PATIDAR MR 01/07/2009

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