

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121860

FILED
Feb 09, 2011
Secretary of State

Entity Name: NAVARRO DISCOUNT PHARMACIES, LLC.

Current Principal Place of Business:

9400 NW 104 STREET
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

9400 NW 104 STREET
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 76-0846596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVARRO DISTRIBUTION CENTER, LLC
9400 NW 104 STREET
MEDLEY, FL 33178 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
Name: RICO, JORGE
Address: 9400 NW 104 STREET
City-St-Zip: MEDLEY, FL 33178

Title: MGR
Name: CABRERA, MARCIO
Address: 9400 NW 104 STREET
City-St-Zip: MEDLEY, FL 33178

Title: MGR
Name: SALADRIGAS, CARLOS
Address: 9400 NW 104TH STREET
City-St-Zip: MEDLEY, FL 33178

Title: MGR
Name: NAVARRO, MARCEL L
Address: 9400 NW 104TH STREET
City-St-Zip: MEDLEY, FL 33178

Title: MGR
Name: NAVARRO, GABRIEL L
Address: 9400 NW 104TH STREET
City-St-Zip: MEDLEY, FL 33178

I hereby 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: JUAN M. ORTIZ

CFO

02/09/2011

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