

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002429

FILED
Apr 10, 2009
Secretary of State

Entity Name: NAVARRO DISCOUNT PHARMACY, LLC

Current Principal Place of Business:

9400 N.W. 104 STREET
MEDLEY, FL 33174

New Principal Place of Business:

Current Mailing Address:

9400 N.W. 104 STREET
MEDLEY, FL 33174

New Mailing Address:

FEI Number: 65-0204207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYERSON, TIM
9400 N.W. 104 STREET
MEDLEY, FL 33174 US

Name and Address of New Registered Agent:

NAVARRO DISCOUNT PHARMACIES, LLC
9400 N.W. 104 STREET
MEDLEY, FL 33174 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: JUAN ORTIZ

04/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR () Delete
Name: NAVARRO, JOSE F
Address: 9155 S. DADELAND BLVD., SUITE 1216
City-St-Zip: MIAMI, FL 33156 US

Title: MR () Delete
Name: FERNANDEZ, MIGUEL B
Address: 121 ALHAMBRA PLAZA, SUITE 1100
City-St-Zip: CORAL GABLES, FL 33134 US

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: JUAN ORTIZ

CFO

04/10/2009

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