

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000006180

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** EMPIRE PHARMACY CONSULTANTS L.L.C.

**Current Principal Place of Business:**

247 SW 8TH STREET #218  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

247 SW 8TH STREET #218  
MIAMI, FL 33130

**New Mailing Address:**

**FEI Number:** 32-0192408      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CHEN, MICHAEL  
31 S.E. 5TH STREET, SUITE 2002  
MIAMI, FL 33131 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:** MGRM ( ) Delete  
**Name:** CHEN, MICHAEL  
**Address:** 31 S.E. 5TH STREET, SUITE 2002  
**City-St-Zip:** MIAMI, FL 33131

**ADDITIONS/CHANGES:**

**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: MICHAEL K. CHEN

MGRM

04/30/2009

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