

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000052715

FILED
Apr 22, 2009
Secretary of State

Entity Name: SUPER DISCOUNT PHARMACY LLC

Current Principal Place of Business:

1423 SOUTH COLLINS
PLANT CITY, FL 33566

New Principal Place of Business:

1423 SOUTH COLLINS
PLANT CITY, FL 33563

Current Mailing Address:

1423 SOUTH COLLINS
PLANT CITY, FL 33566

New Mailing Address:

1423 SOUTH COLLINS
PLANT CITY, FL 33563

FEI Number: 26-0186101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELASQUEZ, MARTA
38642 10TH AVE.
ZEPHEHILLS, FL 33540 US

Name and Address of New Registered Agent:

VELASQUEZ, MARTA
38642 10TH AVE.
ZEPHYRHILLS, FL 33542 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: MANJIT MATHARU

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MATHARU, MANJIT
Address: 10215 GUAILES LANDING
City-St-Zip: TAMPA, FL 33647

Title: MGR () Delete
Name: VELASQUEZ, MARTA
Address: 38642 10TH AVE
City-St-Zip: ZEPHEHILLS, FL 33540

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MATHARU, MANJIT
Address: 10215 GUAILES LANDING
City-St-Zip: TAMPA, FL 33647

Title: MGR (X) Change () Addition
Name: VELASQUEZ, MARTA
Address: 38642 10TH AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

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: MANJIT MATHARU

MGR

04/22/2009

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