

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060786

FILED
Jan 10, 2012
Secretary of State

Entity Name: COMPLETE PHARMACY AND MEDICAL SOLUTIONS, LLC

Current Principal Place of Business:

6157 S.W. 167TH ST., UNIT 16-F
MIAMI, FL 33014

New Principal Place of Business:

6157 N.W. 167TH ST., UNIT 16-F
MIAMI LAKES, FL 33015

Current Mailing Address:

6157 S.W. 167TH ST., UNIT 16-F
MIAMI, FL 33014

New Mailing Address:

6157 N.W. 167TH ST., UNIT 16-F
MIAMI LAKES, FL 33015

FEI Number: 26-0353814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAISER, GREGORY G
14315 LINDED DRIVE
SPRING HILL, FL 34609 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
Name: GAISER, GREGORY G
Address: 6157 N.W. 167TH ST., UNIT 16-F
City-St-Zip: MIAMI, FL 33015

Title: MGR
Name: FADDOUL, RITA
Address: 28314 BROKEN MEAD PATH
City-St-Zip: WESLEY CHAPEL, FL 33543

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: GREGORY G GAISER

COO

01/10/2012

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