2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Nov 05, 2009
Secretary of State

DOCUMENT# L07000069542

Entity Name: PHARMARUS DISTRIBUTORS LLC

Current Principal Place of Business:

8290 SOUTHWEST 99TH STREET
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

8290 SOUTHWEST 99TH STREET
MIAMI, FL 33156

New Mailing Address:

FEI Number: 22-3065645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STULA, GREGORY MGR
8290 SW 99 ST.
MIAMI, FL 33156 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 ( ) Delete
Name: STULA, GORDON
Address: 8290 SOUTHWEST 99TH STREET
City-St-Zip: MIAMI, FL 33156

Title: MGR (X) Delete
Name: STULA, GREGORY
Address: 8290 SOUTHWEST 99TH STREET
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: NEPRANOVA & ASSOCIATES, LLC
Address: 8290 SOUTHWEST 99TH STREET
City-St-Zip: MIAMI, FL 33156

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: NEPRANOVA & ASSOCIATES MGR 11/05/2009

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