

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000062519

Entity Name: PHARMAKON, LLC

FILED  
Apr 25, 2010  
Secretary of State

**Current Principal Place of Business:**

7862 TURNSTONE CIR W  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

2386 DUNN AVE  
117  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

7862 TURNSTONE CIR W  
JACKSONVILLE, FL 32256

**New Mailing Address:**

1375 FRYSTON ST  
SAINT JOHNS, FL 32259

FEI Number: 27-0445570

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DIAL, DAVID C  
144 ARLINGTON RD. S  
STE 2  
JACKSONVILLE, FL 32216 US

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

PATEL, NISHANT K  
1375 FRYSTON ST  
SAINT JOHNS, FL 32259 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: NISHANT PATEL

04/25/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PATEL, N K  
Address: 1375 FRYSON ST  
City-St-Zip: SAINT JOHNS, FL 32259

Title: MGR  
Name: PATEL, M R  
Address: 7862 TURNSTONE CIR W  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR  
Name: PATEL, D B  
Address: 154 LAUREL MARSH WAY  
City-St-Zip: KINGSLAND, GA 31548

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: NISHANT PATEL

MGR

04/25/2010

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