

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L10000054414

Entity Name: SUNSET PHARMACY, LLC

FILED
Apr 20, 2011
Secretary of State

Current Principal Place of Business:

4224 CLEVELAND AVE. BLDG 1, UNIT 5
FT. MYERS, FL 33901

New Principal Place of Business:

4224 CLEVELAND AVE. BLDG 1, SUITE 5
FT. MYERS, FL 33901

Current Mailing Address:

4224 CLEVELAND AVE. BLDG 1, UNIT 5
FT. MYERS, FL 33901

New Mailing Address:

4224 CLEVELAND AVE. BLDG 1, SUITE 5
FT. MYERS, FL 33901

FEI Number: 27-2627833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLUKOWSKI, WALTER F
4224 CLEVELAND AVE,
BLDG 1 SUITE 5
FORT MYERS, FL 33901 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: RX SYSTEMS, INC.
Address: 1121 S. MILITARY TRAIL #259
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGRM
Name: CAT MARKETING INC.
Address: 20423 STATE ROAD 7 STE F6-122
City-St-Zip: BOCA RATON, FL 33498

Title: MGRM
Name: HEALTH AND WELLNESS SYSTEMS INC
Address: 8130 GLADES RD #267
City-St-Zip: BOCA RATON, FL 33434

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: LEWIS STOUFFER

MGRM

04/20/2011

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