

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000054067

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** NAVARRO SPECIALTY SERVICES, LLC

**Current Principal Place of Business:**

9400 NW 104TH STREET  
MEDLEY, FL 33178

**New Principal Place of Business:**

9400 NW 104TH STREET  
SUITE A  
MEDLEY, FL 33178

**Current Mailing Address:**

9400 NW 104TH STREET  
MEDLEY, FL 33178

**New Mailing Address:**

9400 NW 104 STREET  
MEDLEY, FL 33178

FEI Number: 45-2121629

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAVARRO DISCOUNT PHARMACIES, LLC  
94000 NW 104TH STREET  
MEDLEY, FL 33178 US

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

NAVARRO DISCOUNT PHARMACIES, LLC  
9400 NW 104TH STREET  
MEDLEY, FL 33178 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/27/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: NAVARRO DISCOUNT PHARMACIES, LLC  
Address: 9400 NW 104TH STREET  
City-St-Zip: MEDLEY, FL 33178

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: JUAN ORTIZ

CEO

03/27/2012

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