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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M57998

1. Corporation Name PALM PHARMACY AND DISCOUNT STORE, INC.

Principal Place of Business 3915 PALM AVE. HIALEAH FL 33012

Mailing Address 3915 PALM AVE. HIALEAH FL 33012



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/26/1987

4. FEI Number 59-2839095 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARQUEZ, JOSE M. 782 NW LEJUENE RD #548 MIAMI FL 33126

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD GUERRA, ARMANDO J. DELETED STREET ADDRESS 9475 JOURNEY'S END ROAD CORAL GABLES FL CITY-ST-ZIP

1.1 TITLE V RODRIGUEZ, Noel A. Change Addition 1.2 NAME 1.3 STREET ADDRESS 13736 SW 21 Street 1.4 CITY-ST-ZIP Miami, Florida

TITLE VD DIAZ, JOSE F. DELETED STREET ADDRESS 9301 SW 103 ST MIAMI FL CITY-ST-ZIP

2.1 TITLE S LOPEZ, Eddy Change Addition 2.2 NAME 2.3 STREET ADDRESS 922 NW 106 Ave. Circle 2.4 CITY-ST-ZIP Miami, Florida

TITLE ~~VD~~ RODRIGUEZ, NOEL A. DELETED STREET ADDRESS ~~13736 SW 21 STREET~~ MIAMI FL CITY-ST-ZIP

3.1 TITLE D GUERRA, Alberto Change Addition 3.2 NAME 3.3 STREET ADDRESS 241 Cape Florida Drive 3.4 CITY-ST-ZIP Key Biscayne, FL 33149

TITLE ~~SD~~ LOPEZ, EDDY DELETED STREET ADDRESS ~~922 NW 106TH AVE. CIRCLE~~ MIAMI FL CITY-ST-ZIP

4.1 TITLE Change Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

TITLE DELETED NAME STREET ADDRESS CITY-ST-ZIP

5.1 TITLE Change Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

TITLE DELETED NAME STREET ADDRESS CITY-ST-ZIP

6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARMANDO J. GUERRA 1/26/99 (305) 226-2507

Date

Daytime Phone #

CR2E034 (1/98)

0127787