

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # M97000000388

1. Entity Name
THE HARVARD DRUG GROUP, L.L.C.



Principal Place of Business
**31778 ENTERPRISE DRIVE
LIVONIA, MI 48150**

Mailing Address
**31778 ENTERPRISE DRIVE
LIVONIA, MI 48150**



01052004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
38-3359612

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BLOOM, JEFF
8465 W. COMMERCIAL BLVD
FORT LAUDERDALE, FL 33351**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GREAT LAKES WHOLESALE DRUGS, INC. 31778 ENTERPRISE DRIVE LIVONIA, MI 48150
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000000023408
02/02/02-88601-024 50.00

000000028920
02/04/04-80042-024 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

Randolph Friedman 1/26/04 734-743-6010