2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050175

Entity Name: GERMA DRUGS.COM INC.

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13961 SW 109 ST 8000 SW 149 AVE

MIAMI, FL 33186 A102

MIAMI, FL 33193

Current Mailing Address: New Mailing Address:

13961 S.W. 109TH STREET 8000 SW 149 AVE MIAMI, FL 33186 A102

MIAMI, FL 33193

FEI Number: 65-1009926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 BARILLAS, GERARDO
 MAESTRE, DAVID

 13961 S.W. 109TH STREET
 8000 SW 149 AVE

 MIAMI, FL 33186 US
 A102

MIAMI, FL 33160 US MIAMI, FL 33193 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: DAVID MAESTRE 01/10/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: O (X) Change () Addition

 Name:
 BARILLAS, GERARDO
 Name:
 MAESTRE, DAVID

 Address:
 13961 S.W. 109TH STREET
 Address:
 8000 SW 149 AVE

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33193

Title: VD () Delete Title: D (X) Change () Addition

 Name:
 MAESTRE, DAVID
 Name:
 BONACHEA, GRETA

 Address:
 12234 S.W. 130TH STREET
 Address:
 8000 SW 149 AVE

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MAESTRE OFF 01/10/2005