


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90174 030 ***150.00

DOCUMENT # P00000050333		
1. Entity Name DESKTOP MEDIA GROUP, INC.		

Principal Place of Business 25400 US HWY 19 N STE 137 CLEARWATER, FL 33763	Mailing Address 25400 US HWY 19 N STE 137 CLEARWATER, FL 33763
---	---

2. Principal Place of Business		3. Mailing Address <i>312 Farmington Avenue</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>Farmington CT</i>	
Zip	Country	Zip <i>06032</i>	Country <i>Hartford</i>



02032005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3658393	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent ESQUIVEL, JULIO C 101 E KENNEDY BLVD STE 2800 TAMPA, FL 33602		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
---	--	---	--

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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD LAGAMBA, WILLIAM L 25400 US HWY 19 N STE 137 CLEARWATER, FL 33763 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>Please see attached list</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCD PATRICK, RONALD J 25400 US HWY 19 N STE 137 CLEARWATER, FL 33763 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANEJA, JUGAL K 25400 US HWY 19 N STE 137 CLEARWATER, FL 33763 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 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

February 28, 2005

Date

860-676-1222

Daytime Phone #

ATTACHMENT

40028521

P00000050333



Officers:

Name

Title

Edgardo A. Mercadante
DrugMax, Inc.
312 Farmington Avenue
Farmington, CT 06032

CEO

Residence: 23 Morgan Place
Unionville, CT 06085

William Lagamba
DrugMax, Inc.
312 Farmington Avenue
Farmington, CT 06032

President & Chief Operation Officer

Residence: 24500 US Hwy 19N, #137
Clearwater, FL 33763

Allison D. Kiene
DrugMax, Inc.
312 Farmington Avenue
Farmington, CT 06032

Secretary

Residence: 27 Bramblebrae Road
South Windsor, CT 06074

Dale Ribaud
DrugMax, Inc.
312 Farmington Avenue
Farmington, CT 06032

Treasurer

Residence: 26 Country Club Lane
East Granby, CT 06026

Donald Aderhold
DrugMax, Inc.
312 Farmington Avenue
Farmington, CT 06032

Assistant Treasurer

Residence: 119 Pond Place
Middletown, CT 06457

ATTACHMENT

40028521

P00000050333



Directors:

Edgardo A. Mercadante
DrugMax, Inc.
312 Farmington Avenue
Farmington, CT 06032

Director

Jay Taneja
DrugMax, Inc.
25400 US Hwy 19N #137
Clearwater, FL 33763

Director

Dr. Phillip Gerbino
University of the Sciences – Philadelphia
600 South 43rd Street
Philadelphia, PA 19104-4495

Director

Peter Grua
HLM Management Company
222 Berkley Street, 21st Floor
Boston, MA 02116

Director

Mark Majeske
734 Highview Avenue
Glen Ellyn, IL 60137

Director

Dr. Rakesh K. Sharma
Heart & Vascular Institute of Florida
1819 Alicia Way
Clearwater, FL 33764

Director

Laura Witt
ABS Capital Partners
400 East Pratt Street, Suite 910
Baltimore, MD 21202-3116

Director