

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040595

FILED
Aug 31, 2004
Secretary of State

Entity Name: XPRESS RX PHARMACY II, INC.

Current Principal Place of Business:

ONE FINANCIAL PLAZA
2600
FORT LAUDERDALE, FL 33394

New Principal Place of Business:

875 EAST 10TH AVE
HIALEAH, FL 33010

Current Mailing Address:

ONE FINANCIAL PLAZA
2600
FORT LAUDERDALE, FL 33394

New Mailing Address:

5400 W ATLANTIC BLVD
MARGATE, FL 33063

FEI Number: 65-1098528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: JAMES, LANCELOT F
Address: 1030 SOUTHWEST 50TH AVENUE
City-St-Zip: MARGATE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LANCLLOT JAMES

PRES

08/31/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date