2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2004
Secretary of State

DOCUMENT# P01000121367

Entity Name: ON LINE PHARMACY, INC.

Current Principal Place of Business:

2399 N. FEDERAL HWY #D
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2399 N. FEDERAL HWY #D
BOCA RATON, FL 33431

New Mailing Address:

2424 N. FEDERAL HWY
STE 301
BOCA RATON, FL 33431

FEI Number: 26-0030277 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHANDLER, ANDREW
2399 N. FEDERAL HWY #D
BOCA RATON, FL 33431

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: CHANDLER, ANDREW
Address: 2399 N. FEDERAL HWY #D
City-St-Zip: BOCA RATON, FL 33431

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: ANDREW CHANDLER PRES 07/21/2004

Electronic Signature of Signing Officer or Director — Date