

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 03, 2007
Secretary of State**

DOCUMENT# P02000064668

Entity Name: SUPERIOR PHARMACY GROUP, INC.

Current Principal Place of Business:

1951 NW 97 AVE
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

1951 NW 97 AVE
DORAL, FL 33172

New Mailing Address:

FEI Number: 02-0615057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELEZ, MAYRA
3403 NW 82 AVE
SUITE 105
DORAL, FL 33122 US

Name and Address of New Registered Agent:

QURESHI, AHMAD M
1951 NW 97 AVE
DORAL, FL 33172 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: MUSTAQUEEM A.QURESHI 08/03/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VELEZ, MAYRA
Address: 13030 NW 8TH STREET
City-St-Zip: MIAMI, FL 33182

Title: DST () Delete
Name: QURESHI, AHMAD M
Address: 3060 SW 109 COURT
City-St-Zip: MIAMI, FL 33165

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: QURESHI, AHMAD M
Address: 3060 SW 109 COURT
City-St-Zip: MIAMI, FL 33165

Title: DST (X) Change () Addition
Name: ZAFAR, SYED F
Address: 9705 SW 95TH AVE
City-St-Zip: MIAMI, FL 33176

Title: D () Change (X) Addition
Name: MERMELSTEIN, DAVID
Address: 9121 SW 66 TERR
City-St-Zip: MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MUSTAQUEEM A QURESHI PD 08/03/2007
Electronic Signature of Signing Officer or Director Date