

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081697

Entity Name: I CARE PHARMACY, INC.

FILED
Jul 08, 2005
Secretary of State

Current Principal Place of Business:

243 WEST PARK AVE
STE 104
WINTER PARK, FL 32789

Current Mailing Address:

243 WEST PARK AVE
STE 104
WINTER PARK, FL 32789

New Principal Place of Business:

1562 PARK LANE SOUTH
SUITE 600
JUPITER, FL 33458

New Mailing Address:

1562 PARK LANE SOUTH
SUITE 500
JUPITER, FL 33458

FEI Number: 55-0790611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ROBERT W
514 HENKEL CIRCLE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

BAKER, CHRIS
1562 PARK LANE SOUTH
SUITE 600
JUPITER, FL 33458 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: CHRIS BAKER

07/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, ROBERT W
Address: 514 HENKEL CIRCLE
City-St-Zip: WINTER PARK, FL 32789

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD () Change (X) Addition
Name: VISKER, JAMIE
Address: 1562 PARK LANE SOUTH, STE 600
City-St-Zip: JUPITER, FL 33458

Title: VPD () Change (X) Addition
Name: BAKER, CHRIS
Address: 1562 PARK LANE SOUTH, STE 600
City-St-Zip: JUPITER, FL 33458

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: CHRIS BAKER

VPD

07/08/2005

Electronic Signature of Signing Officer or Director

Date