2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004
Secretary of State

DOCUMENT# P02000116816

Entity Name: SUPERIOR PHARMACY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1002 SOUTH 9 AVE
WAUCHULA, FL 33873

New Principal Place of Business:

Current Mailing Address:

1002 SOUTH 9 AVE
WAUCHULA, FL 33873

New Mailing Address:

FEI Number: 52-2386344 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QURESHI, MUSTAQEEM A
3060 SW 109 COURT
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD
1600 MIAMI CENTER
MIAMI, FL 33131 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: CORPORATION COMPANY OF MIAMI 03/17/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: QURESHI, MUSTAQEEM A
Address: 1002 SOUTH 9 AVE
City-St-Zip: WAUCHULA, FL 33873

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: QURESHI, MUSTAQEEM A
Address: 1002 SOUTH 9 AVE
City-St-Zip: WAUCHULA, FL 33873

Title: DST ( ) Change (X) Addition
Name: VELEZ, MAYRA
Address: 782 NW 42ND AVE SUITE 348
City-St-Zip: MIAMI, FL 33126

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: A. MUSTAQEEM QURESHI D 03/17/2004
Electronic Signature of Signing Officer or Director Date