2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121719

City-St-Zip:

JUPITER, FL 33469

Entity Name: FLORIDA PHARMACY CONSULTING COMPANY

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
PO BOX 4 TEQUES	4502 TA, FL 33469				
Current Mailing Address:			New Mailing Address:		
PO BOX 4 TEQUES	4502 ГА, FL 33469				
FEI Numbei	r: 37-1453426	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	MONICA CH RD B201 TA, FL 33469				
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	D (SIKORA, MON 275 BEACH RI		Title: Name: Address:	() Change () Addition	

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: MONICA SIKORA DIR 04/27/2004