

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000046580

Entity Name: FRIENDLY PHARMACY, INC.

FILED
Nov 02, 2004
Secretary of State

Current Principal Place of Business:

17439 NW 66 CT
MIAMI, FL 33015

New Principal Place of Business:

9706 SW 92ND. TERRACE
MIAMI, FL 33176

Current Mailing Address:

17439 NW 66 CT
MIAMI, FL 33015

New Mailing Address:

9706 SW 92ND. TERRACE
MIAMI, FL 33176

FEI Number: 55-0827830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOMAR, JOSEPH
17439 NW 66 CT
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

NEHME, FADIA
9706 SW 92ND. TERRACE
MIAMI, FL 33176 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: FADIA NEHME

11/02/2004

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: PD () Delete
Name: MEJ,E, FADIA
Address: 9706 SW 92 TERRACE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NEHME, FADIA
Address: 9706 SW 92 TERRACE
City-St-Zip: MIAMI, FL 33176

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: FADIA NEHME

PD

11/02/2004

Electronic Signature of Signing Officer or Director

Date