2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061800

Entity Name: CANADA DRUGS OF CITRUS INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5462 S SUNCOAST BLVD HWY 19 HOMOSASSA, FL 34446

Current Mailing Address: New Mailing Address:

5462 S SUNCOAST BLVD HWY 19 HOMOSASSA, FL 34446

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONTICCIOLO, NICHOLAS
11702 LINDEN DRIVE
SPRING HILL, FL 34608 US

MONTICCIOLO, NICHOLAS
1475 BREEZY WAY
SPRING HILL, FL 34608 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: NICHOLAS J. MONTICCIOLO 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRFS (X) Change () Addition MONTICCIOLO, NICHOLAS MONTICCIOLO, NICHOLAS J Name: Name: 5462 S SUNCOAST BLVD HWY 19 5462 S SUNCOAST BLVD HWY 19 Address: Address: City-St-Zip: HOMOSASSA, FL 34446 City-St-Zip: HOMOSASSA, FL 34446

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: NICHOLAS J. MONTICCIOLO OWR. 04/28/2005