

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000093676

FILED
Apr 30, 2004
Secretary of State

Entity Name: NORTH HOWARD PHARMACY INC.

Current Principal Place of Business:

3202 N HOWARD AVE.
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

3202 N HOWARD AVE.
TAMPA, FL 33607

New Mailing Address:

FEI Number: 16-1682011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSIMEN, CHRISTOPHER E
1209 W LINEBAUGH AVE.
TAMPA, FL 33612

Name and Address of New Registered Agent:

ADETUTU, ABIDEMI A
3202 N HOWARD AVENUE
TAMPA, FL 33607

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: ABIDEMI ADETUTU

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADETUTU, ABIDEMI A
Address: 3202 N HOWARD AVE.
City-St-Zip: TAMPA, FL 33607

Title: V () Delete
Name: FADARE, ABIOLA O
Address: 7519 TERRACE RIVER DR
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: P () Delete
Name: IJEWERE, PATRICK
Address: 1740 HULLETT DR
City-St-Zip: TAMPA, FL 33511

Title: P () Delete
Name: OSIMEN, CHRISTOPHER E
Address: 12408 CARDIFF DR
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: ABIDEMI ADETUTU

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date