

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000020953

FILED
Oct 28, 2008
Secretary of State

Entity Name: DISPENSING PHYSICIAN CONSULTANTS, INC.

Current Principal Place of Business:

4900 LINTON BOULEVARD
NOS. 21-22
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

Current Mailing Address:

4900 LINTON BOULEVARD
NOS. 21-22
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 16-1693003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, JERRY
100 GOLDEN ISLES DRIVE
STE. 1204
HALLANDALE BEACH, FL 33009 US

Name and Address of New Registered Agent:

PANAKAKOS, POKOPOIS
15125 MICHEL ANGELO BLVD
DELRAY BEACH, FL 33446 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: POKOPOIS PANAKAKOS

10/28/2008

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: P,T () Delete
Name: DROGARIS, GEORGE
Address: 1796 CLOVE ROAD
City-St-Zip: STATEN ISLAND, NY 10304

Title: S () Delete
Name: PANAGAKOS, PROKOPOIS
Address: 1796 CLOVE ROAD
City-St-Zip: STATEN ISLAND, NY 10304

Title: VP () Delete
Name: DEMARTINO, JOHN
Address: 1796 CLOVE ROAD
City-St-Zip: STATEN ISLAND, NY 10304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: PANAGAKOS, PROKOPOIS
Address: 15125 MICHEL ANGELO BLVD
City-St-Zip: DELRAY BEACH, FL 33446

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: POKOPOIS PANAKAKOS

S

10/28/2008

Electronic Signature of Signing Officer or Director

Date