

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020953

FILED
Jan 03, 2012
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 (X)

Name and Address of Current Registered Agent:

PANAKAKOS, PROKOPOIS
15125 MICHEL ANGELO BLVD
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

PANAGAKOS, PROKOPOIS
15155 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: PROKOPIOS PANAGAKOS

01/03/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: PROKOPIOS PANAGAKOS

S

01/03/2012

Electronic Signature of Signing Officer or Director

Date